01.09.15

MGH HOTLINE

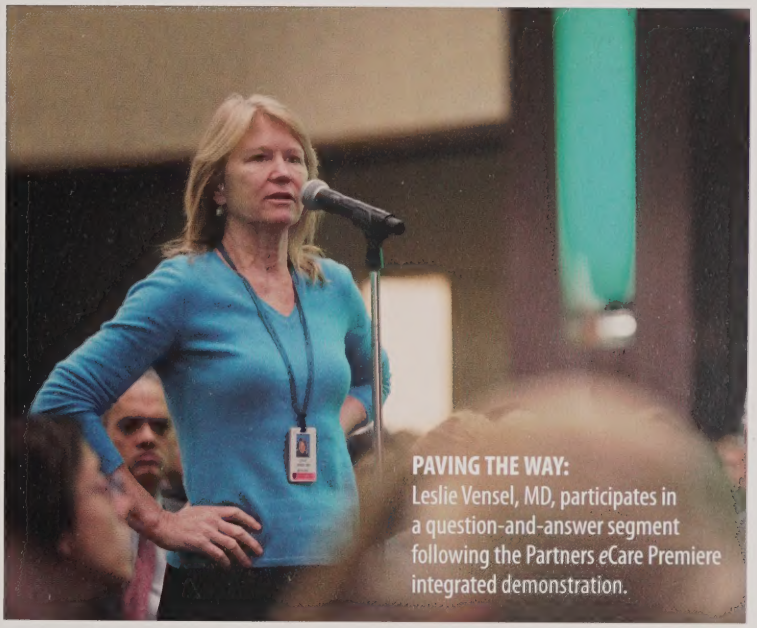
A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Preparing for Partners *e*Care clinical launch at the MGH

MORE THAN 2,000 PEOPLE gathered at the Sheraton Boston Hotel Dec. 10, 2014 for the Partners *e*Care Premiere event to celebrate an integrated demonstration of Epic, Partners' new electronic medical record system. The four-hour session allowed participants – including MGH/MGPO clinicians, administrators, leadership and patient representatives – to see first-hand how Partners *e*Care will improve clinical practices, make administrative processes more efficient and enhance the overall experience for every patient. The MGH also offered a number of live-stream video viewing locations for staff and clinicians at the main campus and offsite locations, as well as specialty breakout sessions for specific departments.

"Right now our clinicians don't appreciate how hard they are working to keep track of what's going on with their patients," says Annabaker Garber, PhD, RN, director of Clinical Informatics. "I think Epic is going to make a huge difference in their ability to find the information they need. And, I think patients are going to be very engaged through the MyChart patient portal – and other kinds of tools – and really feel they are very much a part of their care."

The single electronic medical record will allow a patient's health-related information to be shared among authorized caregivers at all Partners HealthCare sites and affiliated health care organizations. The integrated system also will help care teams deliver more seamless, coordinated care, providing the right information to diagnose and treat patients quickly and safely and to coordinate care more efficiently among different locations and practices. Last July, the MGH/MGPO launched the revenue cycle portion of Partners *e*Care, and leaders are now readying the institution for the clinical portion of the system, expected to go live in the spring of 2016.



PAVING THE WAY: Leslie Vensel, MD, participates in a question-and-answer segment following the Partners *e*Care Premiere integrated demonstration.

For clinicians who have relocated to the MGH from other institutions that use Epic, the implementation is a welcome one. "It will reduce the redundancy and rework that we experience with our current systems," says Frannie R. Kronenberg, MD, MSc, medical director of the Bulfinch Medical Group, who used the electronic medical record during her time at the Ochsner Health System in New Orleans, Louisiana. "I tell my colleagues not to fear it. Yes, it will be a change. Yes, it will still have a lot

(Continued on page 2)

Converse customization

ALL STAR ARTWORK: MassGeneral Hospital *for* Children patient Matt Bolduc, 7, customizes a Converse All Star sneaker at a Dec. 30, 2014 holiday event, made possible by a generous donation from Converse, which plans to move its headquarters to the Lovejoy Wharf in Boston this spring. The new collaboration engages Pediatric Oncology patients in fun, creative and artistic activities while they are receiving care at the clinic. More than 75 children decorated and designed sneakers with the help of local artist Caleb Neelon.

Hochedlinger honored with Jordan Endowed Chair

DEDICATED TO DISCOVERY: From left, Hochedlinger with Darlene and Jerry Jordan

KONRAD HOCHEDLINGER, PHD, of the Center for Regenerative Medicine and the Harvard Stem Cell Institute, was honored Nov. 20, 2014, with the first Gerald and Darlene Jordan Endowed Chair for the Center for Regenerative Medicine. The chair was established through a gift from the Jordans, who are longtime major MGH supporters.

The reception held at the Boston Four Seasons Hotel included remarks by Peter L. Slavin, MD, MGH president, and David Scadden, MD, director of the Center for Regenerative Medicine.

"I cannot think of a more fitting incumbent for this chair than Dr. Hochedlinger," said Slavin. "He is an extraordinarily talented scientist whose work in stem cell research has enormous potential for understanding the causes of disease. These discoveries are critical to improving early diagnosis and developing more effective therapies."

Hochedlinger's laboratory explores safer and more efficient methods of cellular reprogramming. His team has shown that adult cells can be reprogrammed into cells resembling embryonic stem cells by activating a handful of embryonic genes. The resulting cells, called induced pluripotent stem cells, can be derived from a patient's skin or blood cells and have tremendous therapeutic potential.

"This extraordinary gift by Jerry and Darlene will allow us to explore new research areas that would not be funded by conventional funding agencies," said Hochedlinger. "I am very proud to be part of this institution, which is not only a leader in health care but also cares a great deal about its researchers. Among other projects, this gift will enable my lab to dissect the biology of a new type of stem cell we've recently discovered in the stomach. Our goal will be to find new cures for diseases such as stomach cancer."

— *Partners eCare*

(Continued from page 1)

of clicks. But there will be a day when we all will look back, and we will be so glad we made the change. Clinicians will appreciate the efficiencies and how well it enables them to so easily interact with their patients, their colleagues and their staff."

For example, Kronenberg says, for every patient she now sees, she enters the patient's diagnoses multiple times – the patient's note, lab order entry, radiology order entry, PatientKeeper (electronic charge capture system) billing and sometimes in referrals through CRMS (Clinical Referral Management System). In Epic, the diagnoses are entered once. Basic workflows of communicating results to patients can be associated with follow-up lab orders and communication to staff all in one process. "It's definitely difficult to fathom a new way of doing our work. And there will be some challenges in the transition. But I am confident we will get through it and will come to appreciate the differences," Kronenberg says.

For clinicians who are new to Epic, the Premiere event provided a detailed overview of the program and also carved out time for a question-and-answer segment.

"After the inevitable learning curve, I think Epic has the potential to make our workflow much easier and faster," says Leslie Vensel, MD, a physician at Mass General West Medical Group. "I remember going from paper charts to LMR (longitudinal medical record) back in 2002, and that was a pretty dramatic change. Now, we are already using the computer with each patient interaction. From what I saw at the Partners *e*Care Premiere, there are many improvements from LMR, such as a streamlined system for billing or ordering tests."

To view the integrated demonstration from the Partners *e*Care Premiere event, visit *partnersecare.partners.org/premiere.* ■

Leffert lecture highlights palliative care

THE MGH PALLIATIVE CARE DIVISION hosted its fourth annual Robert Leffert, MD, Memorial Lecture: Living Well in the Face of Serious Illness on Dec. 3, 2014 in the O'Keeffe Auditorium.

The keynote speech, "Palliative Care Futurists: Matching Care to Our Patients' Needs," was presented by Diane Meier, MD, FACP, director of the MGH Center to Advance Palliative Care, and highlighted the important role palliative care can play in health care. A panel discussion followed featuring Meier; Peter L. Slavin, MD, MGH president; Katrina Armstrong, MD, MSCE, physician-in-chief of the Department of Medicine; and Andrew Dryfus, president and chief executive officer of Blue Cross Blue Shield.

EXPANDING PALLIATIVE CARE: From left, Linda Leffert; Lisa Leffert; Schwamm; Adam Leffert, Brit Nicholson, MD, chief medical officer and senior vice president, Department of Medicine; Jackson; and Meier

"The diverse and profound expertise of this panel allowed for lively discourse on the expanding role of palliative care in our evolving health care system," said Vicki Jackson, MD, MPH, chief of the MGH Palliative Care Division. "We are grateful for such involvement and support from leaders at the MGH and beyond and look forward to our future at this institution."

The annual lecture honors Leffert, who served as chief of the MGH Department of Rehabilitation Medicine and the MGH Surgical Upper Extremity Rehabilitation Unit. It is made possible by the donation of Leffert's daughter, Lisa Leffert, MD, chief of Obstetric Anesthesia, and her husband, Lee Schwamm, MD, director of the Mass General Stroke Services within the Institute for Heart, Vascular and Stroke Care, director of the Partners Telestroke Center and vice chairman of the Department of Neurology.

Partners to launch urgent care centers

PARTNERS HEALTHCARE will team with MedSpring Urgent Care to open and operate a number of urgent care clinics – called Partners Urgent Care – throughout eastern Massachusetts over the next five years.

"Through our urgent care centers, we can improve community access and offer affordable health care alternatives closer to people's homes," said Gregg Meyer, MD, MSc, Partners chief clinical officer. "With MedSpring Urgent Care, Partners will be able to offer high quality urgent care services that are focused on the needs of our patients in eastern Massachusetts." In the first year, Partners expects to see about 20,000 patient visits. When all of the clinics are up and running, nearly 250,000 patient visits could be expected.

The new urgent care centers will have physicians onsite from 9 am to 9 pm daily, including weekends. Patients will be seen on a walk-in basis, or they can schedule advance appointments. The urgent care sites will ultimately link with Partners *e*Care, facilitating coordination of care between the sites and other physicians involved in a patient's care. Care at Partners Urgent Care will be covered by all public and commercial insurance plans.

Partners already owns and operates four urgent care centers – at the MGH, as well as in Foxboro, Danvers and Waltham. These and other centers like them provide walk-in, non-emergency outpatient care for a wide range of medical conditions – such as asthma and allergies, flu-like symptoms, abdominal pain, minor trauma including sprains and lacerations and other common conditions. Many urgent care centers also provide lab tests, digital X-rays, vaccines and physicals.

"The new centers are very much in keeping with Partners' population health management strategy to improve care delivery and access, increase efficiency and reduce health care costs," said Meyer.

He notes that urgent care centers offer a cost-effective and time-saving alternative for conditions that are not severe enough to require an emergency room visit. Across the U.S., more than half of all emergency room visits are for nonemergency conditions that could be safely treated in an urgent care setting. ■

Center for Transplantation Sciences – A new partnership

THE MGH TRANSPLANTATION BIOLOGY RESEARCH CENTER (TBRC) and the Thier 8 Transplant Surgery Research Laboratory combined on Jan. 1 to form the Center for Transplantation Sciences (CTS). The CTS will be co-directed by Joren Madsen, MD, DPhil, director of the MGH Transplant Center and co-director of the TBRC; James F. Markmann, MD, PhD, chief of the Division of Abdominal Transplantation; and Laurence A. Turka, MD, co-director of the TBRC. David H. Sachs, MD, director of the TBRC laboratories, will serve as scientific director.

"The CTS will build on the well-recognized strengths of the MGH transplantation laboratories, develop new synergies and further basic and translational research missions," said Madsen.

The CTS aims to improve the lives of patients with organ, tissue and cell transplants by better understanding the mechanisms underlying the immune response, by developing novel means of inducing immune tolerance and by finding creative ways to increase the supply of donor organs.

TRANSFORMING TRANSPLANTATION: From left, Turka, Madsen and Markmann

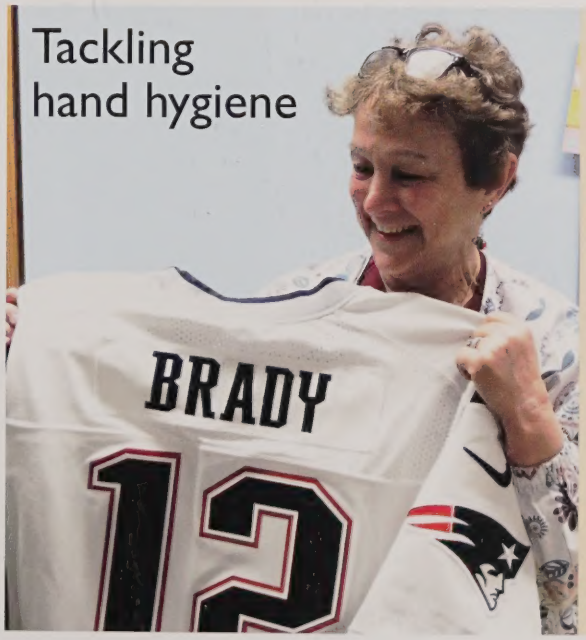
In addition to the study of transplantation immunology, the new center incorporates diverse sciences such as organ restoration, organ bioengineering and treatment of blood cancers, all of which have the potential to transform the field of transplantation even though they may not traditionally be considered within the transplant discipline.

"The field is ripe for innovative discovery that addresses our primary problems of an inadequate organ supply and the need for chronic immunosuppression," said Markmann.

Turka adds, "Under our combined leadership CTS will enable a higher degree of scientific collaboration within the MGH transplant research community. The center will provide a more fertile environment for scientists to make the next scientific and clinical breakthroughs and further leverage our expertise to improve the lives of transplant patients."

For more information, visit *http://www.massgeneral.org/CTS/*.

Tackling hand hygiene



TEAM EFFORT: Ellie Carrieri, RN, of Ellison 7, was the winner of a New England Patriots jersey signed by quarterback Tom Brady for her work as an MGH Hand Hygiene Champion. The Dec. 26, 2014 event marked the Hand Hygiene Program's 10th anniversary, honoring a decade of efforts by more than 150 champions, all of whom were entered in the raffle. "Their efforts produced a measurable impact on our infection rates – a very important and successful team victory – and they did the work without any expectation of individual recognition," says Judy Tarselli, RN, of the Infection Control Unit. The jersey was presented to Carrieri by Erica Shenoy, MD, associate chief of the Infection Control Unit, and Dee Dee Suslak, RN, nurse director of the Infection Control Unit.

01.09.15

MGH HOTLINE

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall
617-726-0275

ASSISTANT EDITOR
Emily Williams
617-724-275

CONTRIBUTOR
Mae Driscoll

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

Marked on the map

TRUE HONOR: MGH Pediatric Neuromuscular Clinic staff

THE MGH PEDIATRIC Neuromuscular Clinic is kicking off 2015 on a high note. The program recently was named a Certified Duchenne Care Center by Parent Project Muscular Dystrophy (PPMD), which is the largest U.S. nonprofit organization aimed at ending Duchenne's Muscular Dystrophy, the most common fatal genetic disorder diagnosed in childhood.

"This is truly an honor," says Fawn Leigh, MD, director of the Pediatric Neuromuscular Clinic. "All of us in the clinic are thrilled to be part of this initiative to recognize centers of excellence. This underscores our commitment to providing high quality comprehensive care to patients with Duchenne."

The MGH is the sixth institution in the nation to be certified by PPMD. The program works to deliver coordinated, multidisciplinary care for infants, children and adolescents with a wide variety of neuromuscular disorders, including Duchenne. Leigh says this designation puts the MGH on the map as one of the top hospitals for muscular dystrophy.

"This builds momentum," Leigh says. "We hope this will lead to more great things to come – improving lives and finding better treatments."

Oh baby!

HAPPY BIRTHDAY!: Donna Hill and Spencer Weigman welcomed daughter Rylee Margaret Weigman into the world at 12:43 am on Jan. 1, making her the first baby born at the MGH – and in Boston – in 2015. Rylee weighed 8 pounds and 4 ounces.

Caroline's cause

STRAIGHT FROM THE HEART: Caroline Murray is hoping to make a difference. The 9-year-old has been collecting funds for MGH Alzheimer's research to help her grandmother and others who suffer from the disease. She recently visited the hospital to drop off the donations and was honored with a certificate of appreciation by the Department of Anesthesia, Critical Care and Pain Medicine, where her mother Sherri Murray, an administrative coordinator in Cardiac Anesthesia, works. To learn more about Caroline's Community Outreach for Alzheimer's Awareness & Research, visit *https://www.facebook.com/CarolinesCauses*.

01.16.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Improving cancer detection with tomosynthesis

FROM EVERY ANGLE: ter Meulen analyzes images from a screening mammography

WHEN ELAINE INTERNICOLA, 68, went to the MGH Revere HealthCare Center for her routine mammogram last spring, she never expected it to be anything but routine. "I had been getting them for years, so I didn't expect them to find anything."

But this time – using breast tomosynthesis – clinicians detected a lump behind the nipple of her right breast. Less than one month later, Internicola underwent surgery for breast cancer. Her nipple and a lymph node were removed, and she now has been cancer-free for six months.

"The cancer would probably not have been detected without tomosynthesis," says Deborah ter Meulen, MD, a radiologist in the MGH Breast Imaging Division. "It was in a tough spot, hidden by her nipple, and it was not present on her last mammogram."

Breast tomosynthesis is performed like a conventional mammogram but provides a more detailed view. An X-ray camera takes 13 pictures from all angles within a few seconds, and computer software reconstructs the images into 1mm slices, so the breast can be examined not just as a flat object but as layers of tissue – which is especially helpful for patients with dense breasts.

"With tomosynthesis, the reconstruction allows you to see something the size of a marble hiding behind something the size of a golf ball," ter Meulen says. "The first year we found a lot of cancers.

(Continued on page 2)

ADUSUMILLI

New year, better sleep

BETTER SLEEP IS A RESOLUTION that should be on everyone's list, according to Josna Adusumilli, MD, an MGH neurologist and sleep specialist. But when it comes to sleep, how much is enough and what is the best way to get restful sleep? Adusumilli explains.

What defines a "good night's sleep?"

It's all about the quantity and quality of sleep. In terms of quantity, everyone has a certain number of hours of sleep they need in order to feel refreshed and productive during the day. Some people are "short sleepers" and can get away with fewer hours of sleep. Others are "long sleepers" and need more sleep. There is no one-size-fits-all number. If a person goes to bed when they feel drowsy, wakes up in the morning naturally without an alarm clock, and is alert and awake during the day, then he or she is likely getting good sleep. In terms of quality, if a person snores or has restless sleep, there may be an underlying medical problem, such as obstructive sleep apnea.

(Continued on page 4)

— *Tomosynthesis*

(Continued from page 1)

We look at the findings and think, it is there but we just can't see it on the 2D mammogram."

In 2011, the MGH was the first hospital in the country to perform a clinical breast tomosynthesis exam. Today the technology is the standard protocol for all mammograms at the hospital, and ter Meulen says it is not only helping to find more cancers, but it is also reducing patient callback rates from 10 percent to 5 percent.

"It's a win-win situation," she says.

Internicloa is grateful for her care and for the technology that caught the cancer early, and she is especially grateful for one small suggestion she received when she accidentally showed up for her mammogram a day early.

"I wasn't going to come back the next day because it was inconvenient, but patient service coordinator Samia Alimoussa insisted I keep the appointment," says Internicola. "I felt very lucky, because if I had cancelled that appointment I would have waited another year to have a mammogram." ■

CERTIFICATE OF COMPLETION: Internicola and her husband Salvatore, following completion of her radiation treatment for breast cancer

Achieving savings on coronary arterial devices

HEART PATIENTS OFTEN UNDERGO balloon angioplasty procedures to open a blocked artery and may have one or more stents implanted to keep the artery open. Approximately 600,000 angioplasty procedures are performed annually in the U.S. The MGH, along with Brigham and Women's Hospital (BWH) and North Shore Medical Center (NSMC), require balloons and/or stents for the treatment of blocked coronary arteries.

As part of Partners HealthCare's commitment to improving patient affordability – by seeking savings and efficiencies while maintaining quality – a Partners Materials Management team worked to reduce spending on balloons and stents used as part of angioplasty and similar procedures. Each year, Partners spends more than $4 million on these products. The challenge to this patient affordability team was to achieve best-in-class pricing with the three major device vendor/suppliers.

The team worked with representatives from the cardiovascular labs at the MGH, BWH and NSMC, who provided guidance on vendor products, best practices in patient care and their own current and future needs.

Armed with data from the lab advisors, Materials Management was able to negotiate with all three major suppliers to achieve the lowest prices possible. The resulting contracts put Partners among the 10 percent of customers in the U.S. who get preferred pricing, saving nearly $850,000.

"Coronary angioplasty balloon, and in particular stent technology continually improves," says Michael A. Fifer, MD, medical director of the Knight Center for Interventional Cardiovascular Therapeutics. "With collaboration among the three cardiac catheterization laboratories in the Partners network, we have been able to ensure that our patients are treated with the best available devices, while at the same time controlling costs."

Celebrating MLK and YMCA Achievers

FOR MORE THAN THREE DECADES the New England Gospel Ensemble has entertained audiences with their uplifting voices. On Jan. 9 in the East Garden Room, they shared their music and messages of hope at the Association of Multicultural Members of Partners (AMMP) annual tribute to honor the life of Rev. Dr. Martin Luther King Jr.

"Today's celebration honors a great leader and visionary, but it also provides us with an ideal opportunity to acknowledge the many educational services and programs that help keep Dr. King's vision of equality alive," said Jeff Davis, senior vice president of MGH Human Resources, who welcomed staff and guests.

Davis said the observance of Martin Luther King Jr. Day is a time to reflect on the recent deaths of Michael Brown and Eric Gardner and the senseless killing of New York police officers Wenjian Liu and Rafael Ramos.

"These tragic events have raised the issues of equality and justice in this country and reminded all of us that racial divisions still exist," he said.

UPLIFTING: Members of the New England Gospel Ensemble perform at the MLK tribute

The event also was an opportunity to recognize two MGHers – David Marquez, a senior security officer in Police and Security, and Mario Dugal Rodas, an administrator in Physical and Occupational Therapy – who were among six Partners employees selected to receive the Greater Boston YMCA Achievers Award, recognizing their professional and community-based achievements, as well as community service efforts. Nominated by their colleagues and peers, the YMCA Achievers will be recognized at a May 20 award ceremony at the University of Massachusetts in Boston.

"It is timely that we chose the Martin Luther King celebration to recognize our YMCA Achievers," said Carlyene Prince-Erickson, director of MGH Employee Education and Leadership Development. "When I think of Dr. King, I think of a servant leader, someone who saw himself in terms of what he could do in service to help others. I think that really captures the true spirit of the YMCA Achievers."

MGH hosts hack-a-thon to spur innovation in Ebola fight

INNOVATORS AROUND THE GLOBE are scrambling to develop new tools and methodologies to ease the spread of the Ebola virus disease and alleviate the risk for both patients and caregivers in affected areas. The MGH convened more than 120 clinicians, innovators, engineers and entrepreneurs for the Stop Ebola Hack-a-thon Dec. 13 and 14.

Hosted by the MGH Center for Global Health's Consortium for Affordable Medical Technologies (CAMTech) and Office for Global Disaster Response, the event was aimed at pairing clinical specialists with technical experts and business leaders to develop devices and strategies to improve treatment of Ebola patients and protect caregivers in the context of care delivery in West Africa.

INNOVATIVE IDEAS: A hack-a-thon participant works on a potential solution

"Such diversity in one room helps to fast-forward innovations to save lives," said Kristian Olson, MD, medical director of CAMTech. "We know the best solutions are those that not only address a problem, but also are informed by subject-matter experts and conceptualized in an economically sustainable way."

After two days of around-the-clock work by participants and mentors, 45 identified challenges resulted in 17 new potential solutions, ranging from an ultra-low cost means of detecting veins in an Ebola patient to a readily visible sweatband that monitors dehydration in both patients and health workers. The innovative ideas were presented to a panel of judges with expertise in infectious diseases, engineering, front-line treatment of Ebola and humanitarian response.

"It was amazing to see the energy. The ideas have immediate application and implementation possibilities with an organization that already has the boots on the ground," said Hilarie Cranmer, MD, director of Global Disaster Response and lead technical advisor to International Medical Corps' Ebola response.

The top prize winners included two MGH employees – Evelyn Picker, MD, of the Department of Medicine, and Sean Doyle, of the Department of Radiology – whose teams created an optimized Ebola Treatment Unit that is mobile, scalable and can integrate culturally sensitive infection control and training methods in rural settings, and a voice-controlled bracelet that can monitor heart rate and temperature as well as notify health care workers of potential problems with low power and no Internet.

For more information about MGH Global Health and CAMTech, visit *www.massgeneralcenterforglobalhealth.org/camtech.* ■

Right care, right place, right time

A 71-YEAR-OLD PATIENT lives with his wife in a single-family home with a flight of stairs leading to his bedroom and bathroom. His diagnosis is osteoarthritis of the left knee, hypertension and benign prostatic hypertrophy. He undergoes an uncomplicated left total knee replacement on the day of admission, and his post operative course includes physical therapy. He is weight-bearing as tolerated but is progressing slowly with therapies due to pain. He has not been able to navigate stairs because of pain issues and reduced endurance. Which post-acute care option is best?

During Interdisciplinary Grand Rounds on Jan 8, Rachael McKenzie, RN, nurse director, Case Management, and Laurene Dynan, RN, Case Management specialist, examined the opportunities and challenges related to post-acute care. The training module defines the levels of post-acute care according to Medicare guidelines and helps explain the nuances of what each option can offer patients.

"The entire care team needs to be a part of the post-acute care process to ensure decisions are made on an individual patient's needs, the plans for ongoing treatment, available care options and input from the team, family and patient," said Dynan.

The presentation demonstrated that a well-planned discharge – in which the patient is placed in the most appropriate post-acute care setting – supports more durable recoveries, increases patient satisfaction, and reduces readmissions and the overall cost of care.

"This is how we are thinking as we look at the bigger picture," McKenzie said. "After a patient leaves the hospital we want it to be a success story."

So what is the optimal post-acute care plan for the 71-year-old patient? The discharge plan would include pain management and ongoing physical therapy 5 to 7 days a week at a skilled nursing facility.

The post-acute care training module will be presented at two additional Interdisciplinary Grand Rounds from 1:30 to 2:30 pm on Jan. 22 and Feb. 12 in the O'Keeffe Auditorium.

For more information, contact Steven Knuesel, MD, at *sknuesel@partners.org* or 617-724-3874, or the Case Management Department at 617-726-3666.

Available levels of post-acute care

Outpatient/ambulatory. Patients are not homebound but require ongoing therapy services at discharge. Transportation must be available and/or accessible, and number and types of visits are based on the patient's progression.

Home care. Patients can return home but require skilled care. Medically complex patients average 10 to 15 visits per episode of care.

Skilled nursing facility (SNF). Patients can only tolerate one to three hours of therapy a day and need nursing to establish or maintain medical stability. They stay 10 to 20 days on average. SNFs vary in their available services.

Inpatient rehabilitation facility. Patients need a high level of therapy services and a moderate level of medical and nursing care. They stay 12 to 16 days on average.

Long-term acute care. Patients need a high level of medical and nursing care and moderate levels of rehabilitation to establish and maintain stability. They stay on average more than 25 days.

01.16.15

MGH HOTLINE

Change in *Hotline* schedule

MGH Hotline will not publish Jan. 23 because of the MLK holiday. The regular publication schedule will resume Jan. 30.

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

ASSISTANT EDITOR
Emily Williams
617-724-275

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

— *Sleep*

(Continued from page 1)

How would you define "bad sleep?"

When a person is unable to wake up without an alarm clock, sleeping in on the weekends to catch up on lost sleep and survives on caffeine to get through the day.

What are some popular myths associated with sleep?

One common myth is that drinking alcohol helps you sleep. Alcohol helps people fall asleep but it wrecks sleep afterward and causes fragmented sleep. Alcohol also relaxes the muscles in the upper airway, worsening snoring and sleep apnea, which affect sleep quality as well. Also, insomniacs often go to bed earlier in order to get a head start on their sleep. This is actually counterproductive. The longer a person lies awake in bed trying to fall asleep, the stronger the possibility of the bed becoming a cue for being awake rather than asleep.

What are some health benefits from sleep?

Sleep is a vacuum cleaner. It gets rid of all the unnecessary details, filters out what is important and consolidates what is learned during the day. That's why "sleep on it" is a popular saying; the answer might become clear after a night of sleep.

If people are unable to obtain 8 hours of sleep per night due to complex work schedules, etc., are naps a good alternative?

Some people don't need eight hours of sleep, but when a person is sleep deprived, a nap is definitely helpful. Studies have shown that after a night of poor sleep, a short nap can increase mood, alertness, performance and safety. If a nap lasts too long, however a person can enter deep sleep and wake up feeling groggy. A 20-minute nap is good for the average person.

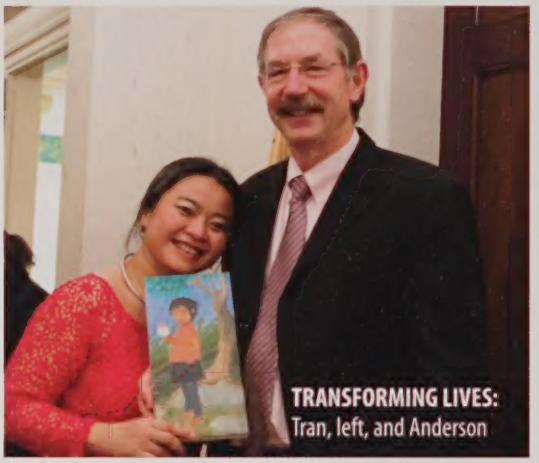
For more information, visit *www.mghsleep.com*.

Culinary creations

FROM CLASSROOM TO KITCHEN: Students ages 10 to 17 are cultivating a love for cooking at an after-school program organized by the MGH Revere Youth Zone. The classes – aimed at addressing the childhood obesity epidemic with fun-filled culinary adventures – are held every Friday at the Revere Recreation Center on Beach St. Youth Zone staff member Leslie Heffron, RN, MEd, of the MGH Revere HealthCare Center, says learning to make kid-friendly recipes from nutritious whole foods is a priority for the weekly lessons. "You'll find them chopping veggies to accompany a homemade hummus dip, peeling apples to make pie from scratch, even roasting fresh brussel sprouts for a tasty snack," she says. For more information, contact Heffron at *lheffron@partners.org*.

VAC offers hope to Vietnamese children

THE VIETNAM VASCULAR ANOMALIES CENTER (VAC) hosted its fifth annual Classical Benefit Dinner Concert at the Goethe-Institute in Boston on Dec. 7, 2014. With outstanding musical performances, Vietnamese delicacies, and a silent auction, the evening drew more than 100 guests and helped raise $30,000 for the humanitarian organization.



TRANSFORMING LIVES: Tran, left, and Anderson

VAC is a medical partnership of physicians from the MGH, Brigham and Women's Hospital, the University of Medicine and Pharmacy of Ho Chi Minh City and others aimed at treating children with disfiguring birthmarks and other severe skin conditions. Since its founding in 2009, the center has transformed the lives of more than 5,000 young patients on a free, safe and effective basis.

"It is deeply gratifying to see the impact our work has on the lives of children," said Rox Anderson, MD, director of the MGH Wellman Center for Photomedicine and VAC co-founder. "It is the best thing I do all year."

Proceeds from the concert will enable the VAC medical team volunteers to embark on their sixth mission to Vietnam. This year the team will open a new satellite clinic in the province of Can Tho in southern Vietnam with the hope of reaching more indigent patients in rural areas. VAC also will start a new wound care center in collaboration with Thomas Serena, MD, and Lam Le, MD, of the SerenaGroup. The hope is to provide much needed modern technologies to some of poorest and most debilitated residents of Ho Chi Minh City and surrounding areas.

"Many of the treatments we take for granted in the United States are beyond the reach of families in Vietnam," said Thanh-Nga Tran, MD, PhD, VAC co-founder and an assistant in MGH Dermatology. "The children we treat face social stigma and lives of limited potential simply because of their skin disorders. With resources and training, we hope to change that."

For more information about the VAC, visit *www.vietnamVAC.org*. ■

01.30.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

MGH weathers winter storm Juno

THE CATACLYSMIC BLIZZARD OF '78 still haunts New Englanders. It was what many called the "mother lode" and remains the benchmark by which all other nor'easters are judged. So when Mother Nature unleashed Juno on Jan. 26 and 27, yielding some 25 inches of snow in Boston, memories of that monumental snowstorm were front and center as MGHers rallied just as they did 37 years ago.

"Back in '78, I had nothing to do with snow removal," says George MacNeil, director of MGH Buildings and Grounds. "A lot of people just stayed once they were here. I remember helping out in any way we could."

BULFINCH, '78

The response to Juno was no different. With a state of emergency and travel ban in effect, some staff worked full shifts, others slept at the hospital and many covered shifts for those who could not make it in. Because the hospital was at 100 percent capacity, staff worked tirelessly to admit patients waiting for inpatient beds while coordinating with case managers to find ways to safely discharge patients.

"Despite the challenges, staff responded amazingly well, as they have so many other times," says Paul Biddinger, MD, medical director for MGH Emergency Preparedness.

Adds David Reisman, senior administrative director of Emergency Preparedness, "We had to access the labor pool, but people were willing to volunteer. Staff went out of their way; many came in early prepared to stay for several days and were incredibly flexible to do what they needed to do for patients."

Buildings and Grounds staff was among the many employees who put in extra hours. MacNeil says 53 employees from all trades remained at the hospital for two days, operating in shifts.

"We set limits for the guys, depending on what they were doing, so they got the proper rest," says MacNeil. "The problem with this storm was that it was relentless. It was like we were fighting three or four storms. How the MGH deals with snow removal is different than a shopping mall or business. The hospital can't shut down. We continually have to clear all of our walkways and entrances so that the facility remains accessible, safe and secure at all times."

Jeanette Ives Erickson, RN, DNP, FAAN, senior vice president for Patient Care and chief nurse, says the entire MGH community came together. "The storm didn't mean a day off or a chance to sleep in," she said. "For many it meant extra shifts, and several nights sleeping on cots. This kind of dedication and commitment is what makes the MGH a special place." ■

New MGH*f*C clinic offers treatment for rare disorder

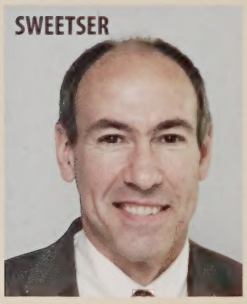
MASSGENERAL HOSPITAL FOR CHILDREN (MGH*f*C) will soon open the world's first Pitt Hopkins Syndrome (PTHS) Clinic. Made possible by a generous donation from Nancy LeGendre and Walter Herlihy, parents of two young women with PTHS, the clinic will focus on providing knowledge-based medical care and serving the comprehensive medical needs of individuals with the disease.

THIBERT

A rare genetic disorder affecting a specific gene called TCF4, PTHS is characterized by developmental delays, limited speech, extreme breathing problems, seizures, gastrointestinal issues and distinctive facial features. Affected individuals typically exhibit a happy demeanor characterized by frequent smiling, laughing and excitability. The number of identified patients with PTHS worldwide has increased from nearly 350 in 2013 to more than 3,000.

With the creation of the clinic, individuals with PTHS and their families will have access to multiple subspecialists, broad-based medical resources and the opportunity to contribute to a biorepository critical to laboratory research into the syndrome at the MGH.

"Our goal here is to provide families with answers," says Ron Thibert, DO, MsPH, co-director of the PTHS Clinic. "The clinic's purpose is to further understand and diagnose Pitt Hopkins Syndrome. Bringing patients with similar diagnoses to a dedicated clinic will allow us to develop in-depth expertise and practice guidelines and also help us expand our clinical knowledge and experience in managing the specific problems these patients might experience over their lifetime."


SWEETSER

Adds Nancy LeGendre, "We are extremely pleased to have this opportunity to support the opening of the Pitt Hopkins Syndrome Clinic. It is frightening and life-altering to learn that your child has a rare disorder. Naming their syndrome was our first step, and now we are hopeful the clinic at MGH*f*C will provide symptomatic care and one-stop directed medical treatment so children and adults with Pitt Hopkins Syndrome can live full, healthy and active lives."

Before mutations in the TCF4 gene were discovered to be the cause of the syndrome in 2007, diagnosis relied exclusively on medical history and physical examination. Genetic testing was available, but a need for clinical suspicion limited testing to the most profoundly affected patients.

"There is currently an evolving genetic picture of rare disorders," says David Sweetser, MD, PhD, co-director of the PTHS Clinic at MGH*f*C. "Expanded genetic screening, which includes gene panel testing and whole exome sequencing, has vastly improved our ability to make the diagnosis. While the true incidence of Pitt Hopkins Syndrome still remains to be determined, we are now learning that there is more variability in this condition than originally thought. We hope to better understand the genotype, keep track of the exact mutation and see how this might correlate with certain clinical features."

The clinic will work closely with MGH*f*C's Angelman Clinic to identify and recruit patients. A number of those now genetically determined to have PTHS were previously diagnosed with Angelman Syndrome, and the syndromes share many of the same medical and developmental concerns.

For more information about the Pitt Hopkins Clinic at MGH*f*C, call 617-726-6540.

MGH nurse promoted to colonel

STEPHANIE KWORTNIK, RN, a clinical nurse specialist (CNS) on Blake 12, was honored Jan. 16 with a new title – colonel in the U.S. Army Reserve.

"It is so emotional. I am so proud of Stephanie," says Mary McAuley, RN, Blake 12 nursing director. "She doesn't wear a uniform every day so you forget about her years of service. She is my CNS and my friend. Stephanie's vacations are spent in places like Africa for reserve training. It really makes you appreciate that someone is caring for us and keeping us safe."

Kwortnik has been caring for patients at the MGH for more than 10 years and serving the country since 1990, when she entered active duty after earning a degree in Nursing and a Regular Army commission through the Reserve Officer Training Corps at East Stroudsburg University in Pennsylvania.

For the past two decades, Kwortnik has served in various nursing roles across the globe, including tours in Central America and Afghanistan and appointments with the Army Personnel Medical Command and the Surgeon's Office for the Chief at the Army Reserve in Arlington, Virginia. In 2012, Kwortnik received her Doctorate of Nursing Science degree at Sage Graduate College in Albany, New York. She currently serves as chief nurse of the 399th Combat Support Hospital in Devens, Massachusetts, while also working full time at the MGH, where she recently completed a post-doctoral research fellowship.

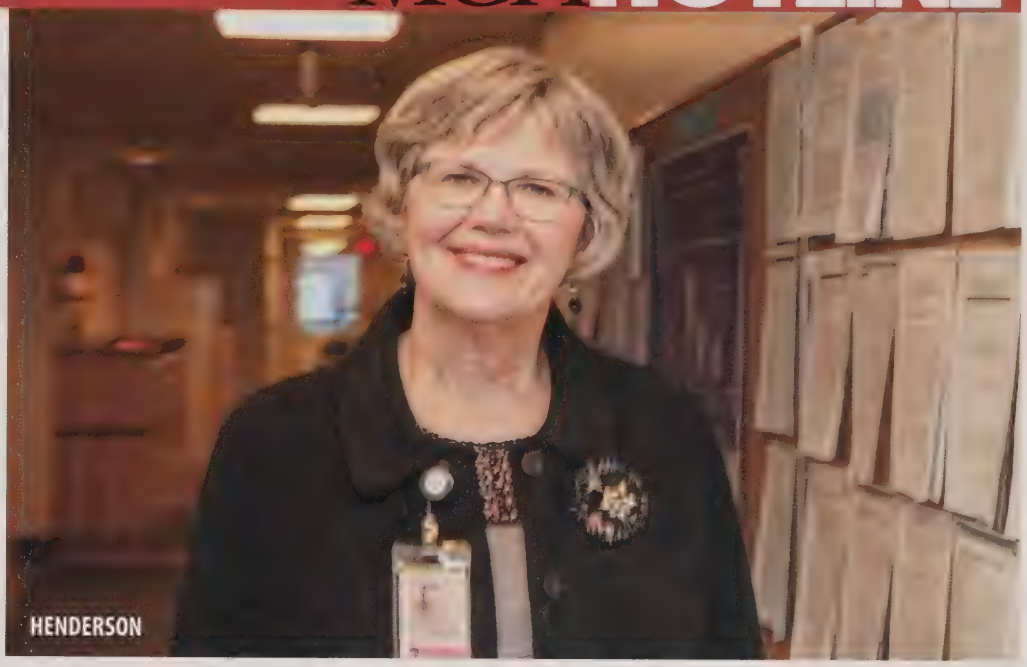
KWORTNIK

Described by military colleagues as a warm but firm and forceful leader, Kwortnik, who was born into a family of veterans, says resilience has always been in her blood. "My grandparents gave me the roots of my foundation," says Kwortnik. "I never expected to get this far in my career. There have been so many colonels ahead of me who have been mentors. I have big shoes to fill."

During the promotion ceremony held in the Red Sox Foundation and MGH Home Base Program conference room, Kwortnik accepted her new rank surrounded by colleagues, family and friends. Maj. Kevin Murphy, RN, of the MGH Emergency Department, was the master of ceremonies and Col. Cameron Wright, MD, an MGH thoracic surgeon, administered the oath of office.

"When we think about the wonderful people who work at this hospital, we don't always think about the magnitude or understand the impact of the work they do outside the hospital and their commitment to the nation and the world," said Jeanette Ives Erickson, RN, DNP, FAAN, senior vice president for Patient Care and chief nurse. "All around this room are people we work with every day in military uniform. It is impressive." ■

Delivering with a midwife



NOW IN ITS 21ST YEAR, the MGH Vincent Obstetrics and Gynecology Nurse-Midwifery Service delivers 26 percent of the babies born at the hospital and participates in the national benchmarking efforts of the American College of Nurse Midwives, where all clinical outcomes are documented. Recently, the MGH was involved in a public service announcement – put together by the college's Massachusetts affiliate that appeared during an episode of "Call the Midwife," a public television series chronicling the lives of midwives and their families in London's East End during the 1950s. Marie Henderson, CNM, MSN, director of the MGH Nurse-Midwifery Service, explains how midwifery has evolved and is an integral part of a multidisciplinary team at the MGH.

What is the role of the midwife?

A nurse-midwife provides gynecological care, family-planning services and primary care for a woman throughout her pregnancy, delivery and post partum. Midwives are experts in normal labor and delivery and are trained to identify any deviations from normal. Midwives promote immediate skin-to-skin contact after birth, breastfeeding within the first hour of life and the bonding of the family unit. After the birth of her baby, we encourage the woman to care for herself and her family by leading an active lifestyle and making appropriate nutritional choices.

What is the history of midwifery at the MGH?

When the MGH opened in 1821, obstetrical patients were not admitted. Women of means and middle-class women had their babies at home. Hospitals were for destitute women who had no safe place in which to give birth. Before the 20th century, traditional midwives were informally trained and attended almost all births. Physicians who attended birth in 1821 were "practitioners of midwifery" and went into the patients' homes. In the state of Massachusetts, midwifery had been very

(Continued on page 4)

'Do your job'

FORMULA FOR SUCCESS: Three words of wisdom from Patriots head coach Bill Belichick have become a mantra for the team's journey to the Super Bowl: "Do your job." The omnipresent pledge has hooked passionate Patriots fans, many of whom proudly don T-shirts with the words emblazoned in large, bold print. On Jan. 16, mascot Pat Patriot brought the slogan to the MGH, recognizing employees who have gone above and beyond, including Hiyam Nadel, RN, CGC, nursing director of the MGH Vincent Obstetrics and Gynecology Service, and Firdosh Pathan, RPh, of the MGH Pharmacy. Pat presented both employees with two tickets to the AFC Championship game against the Colts and "Do your job" gear. During his visit, Pat also stopped by to see patients at MassGeneral Hospital *for* Children.

Tickets to the big show

GO PATS! Two lucky MGH employees are heading to Super Bowl XLIX to watch the Patriots take on the Seattle Seahawks. Christine Weiand, RN, an inpatient nurse, and Erika McCarthy, a marketing manager in Neurology, won the chance to travel to Arizona in a special raffle for employees. More than 9,900 raffle tickets were sold, with proceeds benefitting the MGH Fund. Weiand and McCarthy each received two roundtrip airline tickets, four nights of hotel accommodations at the Patriots team hotel, two tickets to the Super Bowl at the University of Phoenix Stadium, two tickets to the Patriots Welcome Reception, admission to pre- and post-game parties, and official Patriots, and Super Bowl XLIX gear.

A new generation of scientists

THE TIMILTY SCIENCE FAIR is one of the many events postponed this week due to the blizzard. Timilty Middle School eighth-grader Peace Idahor is not surprised by the impact of weather on daily life. His science fair project with supervisor Omar Lopez, a systems manager from the MGH Physical and Occupational Therapy Department, researched the effect of weather on attendance.

Each winter – as a component of the MGH/Timilty Partnership, a program of the MGH Center for Community Health Improvement – James P. Timilty Middle School seventh- and eighth-graders collaborate with MGH mentors on science projects and poster displays. Participating students compete in a schoolwide science fair. Students with exceptional projects are selected to compete in a citywide science competition. The program is now in its 25th year.

Originally from Nigeria, Peace and his family came to the U.S. in 2010. Peace said school was extremely hard at first. While he spoke English, some local Nigerian words are not used in this country, and his accent was hard for others to understand. When Peace transferred to the Timilty School in the sixth grade, he joined the debate team. Peace says this experience made a big difference. "The training and preparation I used to make my argument improved my ability to express myself and my confidence that others understood what I was saying."

Lopez has been a volunteer with MGH Youth Programs for seven years, but this fall was the first time he worked with a student on the science fair project. "I thought I would give it a shot," says Lopez. "I don't have a science background, but I found that that was not an impediment, and I've enjoyed the friendship we've built up over the course of this project. We've had great conversations about all the science questions that Peace was interested in exploring and narrowed them down to areas of common interest."

Peace's project tracked the weather conditions for December and compared this data to attendance data from his school, and also cancellation and no-show data from the MGH Physical Therapy offices. He found that drastic forms of weather such as sleet, snow and heavy rain affected attendance dramatically. Other types of weather conditions – fog, for example – affected attendance to a lesser degree. Peace observed another pattern when he examined the days leading up to weekends and school vacation weeks. There were few, if any, absences during a regular week. However, on Fridays and on the days leading up to vacation, the absences increased. The attendance data from his school and the cancellation and no-show data from the MGH followed a similar pattern.

"I liked experimenting with data to discover what school attendance data had in common with patient appointment data," Peace said. "I also enjoyed my weekly meetings with Omar."

Adds Lopez, "The best part of this experience is watching Peace explore science challenges and seeing where his mind takes him as he identifies the answers."

The Timilty Science Fair has been rescheduled for Feb. 2. For more information on MGH Center for Community Health Improvement programs, visit *http://www.massgeneral.org/cchi/*. ■

— Delivering with a midwife

(Continued from page 3)

restrictive. The Commonwealth didn't issue licenses for nurse midwives to practice until 1977. Seventeen years later, Obstetrics was established at the MGH along with a multidisciplinary team that included a midwife to provide midwifery care to the low and moderate-risk childbearing population.

How has midwifery evolved?

There are 15 midwives at the MGH who continue to be the newest members of the Advanced Practice of Registered Nurses (APRNs) and also leaders in what can happen at the legislative level. The latest regulations of the Board of Nursing states midwives no longer need a supervising physician to practice midwifery but do need a clinical relationship with a physician. One aspect of my job is to make midwifery visible to the MGH community. I want women to know midwifery care is a great option for childbearing.

Do you think the series "Call the Midwife" has helped the public better understand midwifery?

The series portrays caring, educated and professional women who demonstrate the midwifery skill set and have a clinical relationship with an obstetrician. We chose to do a public service announcement because we wanted viewers to know that midwifery care is an option in this state, and at the MGH. ■

For more information about the MGH Nurse-Midwifery staff, visit http://www.massgeneral.org/obgyn/staff/midwives.aspx.

Announcements available online

To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

ASSISTANT EDITOR
Emily Williams
617-724-2753

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Visit *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

02.06.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Torchiana to lead Partners

TORCHIANA

DAVID F. TORCHIANA, MD, chairman and CEO of the Massachusetts General Physicans Organization (MGPO), has been named president and CEO of Partners HealthCare. The Partners Board of Directors made the announcement on Feb. 4, calling Torchiana "a thoughtful, caring leader whose wisdom and understanding of today's health care environment will provide a steady hand for Partners in the years ahead." Torchiana will succeed Gary Gottlieb, MD, who plans to take the helm of the humanitarian organization Partners in Health.

"It has been an incredible experience for me to serve as the leader of the MGPO," says Torchiana, who will transition to Partners in March. "It has been a true pleasure to work closely with Peter (L. Slavin, MD, MGH president), and the many other staff, colleagues and friends who make up this great organization. I look forward to continuing to build upon and strengthen these relationships in the coming years. As part of my new role, I also welcome the opportunity to work with all of the Partners hospitals to tackle the many complex issues we face in this ever-changing health care climate."

Torchiana has led the MGPO since 2003. He previously served as chief of cardiac surgery, and earlier in his career completed residencies in general surgery and cardiothoracic surgery at the MGH. A nominating committee will be formed in the coming weeks to lead the search for a new MGPO chairman and CEO.

"Dr. Torchiana has an appreciation for each institution within our system and all the remarkable people who dedicate themselves to the mission every day," says Edward Lawrence, Esq., chairman of the Partners Board of Directors. "During this time of uncertainty in the health care environment, he will be a leader who provides stability and lends a voice of assurance to the community that Partners HealthCare wants to help address the challenges and be part of a solution." ■

Gearing up for The Joint Commission survey

THE WINDOW FOR THE triennial survey from The Joint Commission is now open. Surveyors are expected to arrive for an unannounced hospitalwide survey sometime between now and August. Here, John Belknap, chief compliance officer, provides a detailed look at what The Joint Commission is, what MGH staff can expect and how to stay informed.

What is The Joint Commission?

The Joint Commission is a nonprofit organization that accredits most hospitals in the United States. They visit thousands of different facilities each year, and 2015 is our year to be visited. We expect a team of about 10 surveyors to arrive unannounced at the MGH early on a Monday morning to spend about a week here, reviewing the processes of care, visiting more than 40 patient care units, ambulatory practices and procedural locations, in addition to our lab sites. This is a very thorough survey, and I expect they also are will interview staff throughout the hospital. Staff members should expect that they may interact with a surveyor from The Joint Commission at some point during the week.

Why is The Joint Commission accreditation important?

The Joint Commission survey is essential to the hospital. All health care organizations across the country are required to be certified by either The Joint Commission or another accrediting body. The Joint Commission is considered to be the gold standard for accreditation, and our accreditation allows us to continue to participate with government paid insurance programs, as well as private payer programs.

What does this mean for the MGH and each and every staff member?

This is our chance to shine in front of The Joint Commission surveyors. Since our last visit three years ago, everyone here has been working tremendously hard to improve the quality of the care we deliver and to ensure that our care is always safe for our patients. This is our chance to share

(Continued on page 4)

Treat your heart to a healthy diet

JUST IN TIME for American Heart Month, a new survey says Americans are confused about what it means to eat a heart-healthy diet. According to the American Heart Association (AHA), heart disease is the leading cause of death among Americans. Along with healthy lifestyle choices, what people eat can have a big effect on heart health. Armed with tips to tackle any confusion, MGH dietician Deborah Krivitsky, MS, RD, LDN, of the Cardiovascular Disease Prevention Center in the Institute for Heart, Vascular and Stroke Care, shares some diet tips that can help lower the risk for heart disease.

KRIVITSKY

What makes a diet heart-healthy?
A heart-healthy diet includes healthy fats. Fish, nuts and oils – with the exception of palm and coconut oil – are great sources of heart-healthy fats. These types of fats are essential for good health, because we need fat for thermal insulation and protection and for transport of fat-soluble vitamins. They certainly make food taste good, and they help us to feel full longer. A heart-healthy diet also includes foods that are high in fiber and provide whole grains. To get the nutrients you need, try to maintain a dietary pattern that emphasizes fruits, vegetables, whole grains, low-fat dairy products, poultry, fish and nuts, while limiting red meat and sugary foods and beverages.

What are the worst things to eat for your heart, and how can I avoid eating them?
Trans fats, salt and sugar are the top three offenders in an unhealthy heart diet. Trans fats are problematic because they simultaneously raise your "bad" low-density lipoprotein (LDL) cholesterol and lower your "good" high-density lipoprotein (HDL) cholesterol. Big culprits include packaged snacks, crackers, bakery goods and some margarines. Americans eat more than double the daily amount of sodium recommended by the AHA. Cutting your salt intake can help lower high blood pressure and also reduce your risk of heart disease, stroke and other health problems. It's fairly easy to keep track of sugars you add yourself. Added sugars in processed foods, however, are more difficult to track. Keeping track of how much sugar you're swallowing is an important part of a heart-healthy lifestyle.

Why is fiber an essential component of a heart-healthy diet?
Fiber is the indigestible portion of food. It is often referred to as "nature's broom" because it takes with it what it can along its path. There are two kinds of fiber – soluble and insoluble. Both types are equally important for health, digestion and preventing conditions such as heart disease, diabetes, obesity and constipation. To ensure an adequate intake of fiber, include at least three fruit servings, two vegetable servings and high-fiber breads, cereals and crackers daily.

Which is more important to avoid, cholesterol or saturated fats?
It is difficult to separate the two, as many foods contain both cholesterol and saturated fat. That being said, limiting saturated fat intake is very important. Saturated fat that comes mainly from animal sources of food – such as red meat, poultry and full-fat dairy products – raises total blood cholesterol levels and LDL cholesterol levels, which can increase your risk of cardiovascular disease. Saturated fat may also increase your risk of type 2 diabetes. My recommendation would be to limit your intake of red meat to no more than one to two times a week.

Throughout the month of February, the Corrigan Women's Heart Health Program will host several events in honor of American Heart Month and the "Go Red for Women" campaign. For more information about how to live a heart-healthy lifestyle, visit http://www.massgeneral.org/heartcenter/ ■

Grappling gridlock

IT WAS THE TRIFECTA of traffic tie-ups on Feb. 3. Mountains of snow, weather-related accidents and MBTA delays created gridlock on the roads surrounding the MGH unlike any Bonnie Michelman, CCP, CHPA, director of MGH Police and Security and Outside Services, has ever seen. "In my 23 years working at the MGH, it was by far the worst," she says.

Less than a week after a blizzard walloped the city with some 24 inches of snow, traffic began backing up around 11:30 am, and the gridlock did not unlock until about 7:30 pm, according to Michelman. "The lobbies were packed, people were waiting to get out of the garages for hours, and ambulances had difficulty getting through."

Extra valet staff and MGH ambassadors were on hand to offer parking assistance and to check cars on the streets and in the garages to make sure people were comfortable and there were no medical issues. Parking at the hospital was free for the day.

"We contacted Boston City and State Police at noon and by afternoon received help," says Michelman. "We also had help from other departments. Most people were very patient, respectful and appreciative. We did everything we could to make them comfortable."

While patients waited in the lobbies to leave the hospital, staff brought coffee and cookies, filled prescriptions for those who required immediate medication and offered comfort, says Debra Burke, RN, MGH associate chief nurse.

HELPING HAND: Theresa Gallivan, RN, MS, associate [illegible]

"We were overwhelmed by the number of people sitting in lobbies," she says. "The stories we were hearing – people who had surgeries trying to get home, people who had chemotherapy waiting for a ride – it was incredible. We went from person to person, listening, seeing how we could help and apologizing."

Adds Ann Prestipino, senior vice president for Surgery, Anesthesia, Emergency Medicine and Clinical Business Development, "A lot of great work was done to support patients and their families to make them as comfortable as possible and to alleviate anxieties while they waited. The efforts of the MGH staff are deeply appreciated."

Bone Marrow Transplant team opens new lab

A CEREMONIAL RIBBON-CUTTING CEREMONY was held Jan. 29 to officially open the new Bone Marrow Transplant Cellular Processing Laboratory. Pictured above, Thomas Spitzer, MD, director of the Bone Marrow Transplant (BMT) Program – flanked by David Ryan, MD, left, MGH Cancer Center chief of Hematology/Oncology and clinical director, and Timothy Graubert, MD, program director for Hematologic Malignancies – snipped the ribbon in the lab, now located in the lower level of the Jackson building.

The BMT program provides lifesaving treatment to patients with blood cancers such as leukemia, lymphoma and myelomas. The new state-of-the-art processing facility will work in partnership with Pathology and will help support the nearly 200 transplants performed at the MGH each year.

"Cutting this ribbon is breaking down a small barrier to a world of wonder, to previously unthinkable avenues of cellular therapy and hematopoietic graft engineering in order to improve the life of patients," said Spitzer.

The group was joined by a small gathering of guests – including Ken and Laura Wernick, whose philanthropy throughout the years has helped sustain the BMT program. Technical supervisor of the lab, Anne Marie Ceredona, explained the intricacies of the collection of cells and the sterilization and processing steps, which are critical to ensure a successful graft and transplantation for patients.

"The BMT program recently reached the milestone of 2,000 procedures over a 20-year time span," Spitzer said.

Afterward, the group moved upstairs to the Sweet Conference room for a celebratory reception, where they were joined by BMT staff and guests. The three hosts took turns thanking the many people at the MGH who have made this program and the new lab a success.

"A lot of what we do could not have been done without the generous support of our donors and our pathology collaboration," said Graubert.

Added Ryan, "In the next 20 years we will cure a lot more patients than we did in the last 20 years, and that is truly a major accomplishment." ■

New pediatric Emergency Department opens

THE NEWLY-RENOVATED EMERGENCY DEPARTMENT (ED) at MassGeneral Hospital *for* Children (MGH*f*C) offers a welcoming space meant just for children and their families.

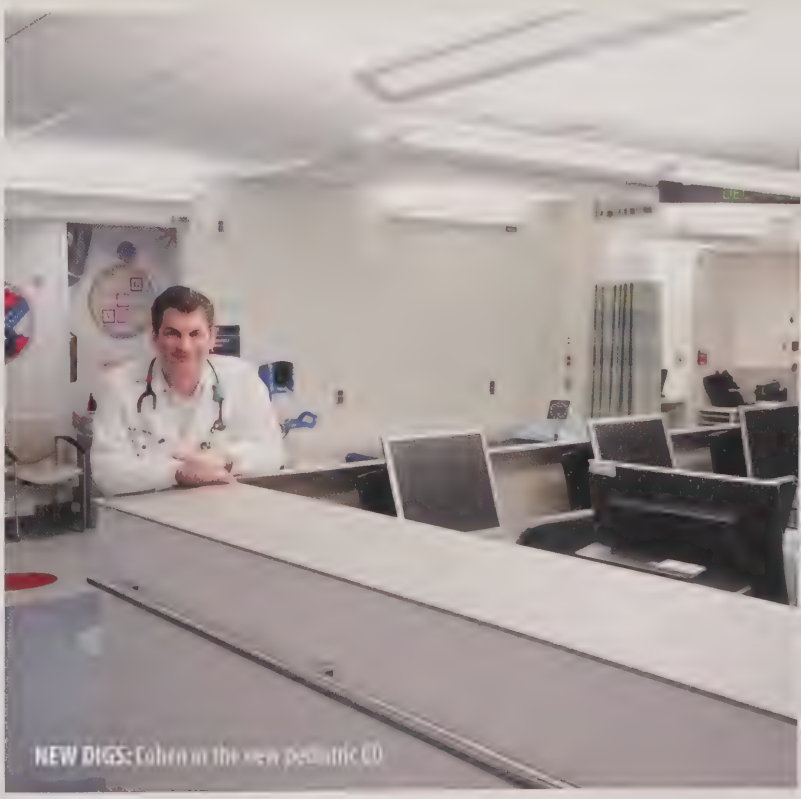
Opened on Jan. 15, the new ED was designed from a pediatric perspective, said Ari Cohen, MD, division chief of Pediatric Emergency Medicine at MGH*f*C. "It's exceptionally child- and parent-friendly and the space is efficient so we can care for children quickly with the most favorable outcomes," he said.

The ED offers many patient-centered features and 800 square feet more than the previous pediatric ED. Featuring colorful waiting rooms with age-appropriate toys and iPads, the space is designed to truly create a more positive patient experience. Located on the ground floor of the White building, the new ED offers pediatric patients their own space separate from adult patients.

"A first impression is important," said Cohen. "Every part of the ED shows that – from our entryway with artwork on the walls and toys in the waiting rooms to the friendly layout."

Surrounding a central charting area for staff and a curtain stretcher bay are six private rooms, including a negative pressure room for patients with infectious illnesses. Named for individual donors, each examination room has a different theme – including the beach, baseball and flying objects, like airplanes and butterflies – and also comes equipped with a television and DVD controls, so children and families can watch movies while they wait during procedures. On the ceiling above every bed are interactive LED light panels, where colors swirl and dance to create a soothing distraction for children as they receive medical care.

Construction for the new ED started shortly after the Lunder building opened in 2011. After nearly five years and with support from the Department of Emergency Medicine and the Storybook Ball 2013 committee, the new ED is now ready for patients.



NEW DIGS: Cohen in the new pediatric ED

02.06.15

MGH HOTLINE

Announcements available online

To read this week's "What's Happening" items, visit www.massgeneral.org/news/hotline

GIFTS THAT KEEP ON GIVING: The MassGeneral Hospital *for* Children (MGH*f*C) recently received two generous donations. On Jan. 20, the hospital celebrated a $600,000 grant from the Ronald McDonald House Charities (RMHC) of Eastern New England, which will be used for the renovation of the Ellison 17 playroom and treatment room. The dedication ceremony was hosted by Allan Goldstein, MD, MGH*f*C surgeon-in-chief, Paula Wright, board president for RMHC of Eastern New England and Ronald McDonald, who appeared in full regalia to perform a magic show for patients. The grant is part of a partnership between MGH*f*C and the RMHC of Eastern New England. Four years ago, the RMHC of Eastern New England renovated two family rooms adjacent to the pediatric inpatient rooms on Ellison 17 and 18.

—*The Joint Commission*

(Continued from page 1)

our best practices with The Joint Commission and to demonstrate that we truly do lead the nation in patient quality and safety.

What do I need to know as an MGH employee?

Most importantly, as an MGH employee you need to understand what The Joint Commission standards are that apply to your position. You want to be able to interact with a surveyor with confidence. You want to be excited to talk with a surveyor and share your best practices and what the performance improvement efforts are in your area and how they relate to the overall hospital goals.

Where can MGH staff learn more about The Joint Commission visit?

The Excellence Every Day intranet site has helpful information and toolkits for staff. We hope you are excited about this upcoming survey, and we hope you would like to learn more about what to expect.

For more information visit, *http://intranet.massgeneral.org/excellenceeveryday*. This interview is also available as a three-minute video. Visit *http://bit.ly/1Kow5Gf* or click the link available on *Hotline* online. ■

MGH 1811

EDITOR
Colleen Marshall Delaney
617-726-0275

ASSISTANT EDITOR
Emily Williams
617-724-2753

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Brown honored

EMERY N. BROWN, MD, PHD, director of the Neuroscience Statistic Research Laboratory in the MGH Department of Anesthesia, Critical Care and Pain Medicine, has been elected to the National Academy of Engineering. Brown is one of fewer than 20 people in the nation who have been elected into all three U.S. academies, the other two being the Institute of Medicine and the National Academy of Sciences. He is the first African American, the first anesthesiologist and only the second faculty member at Harvard Medical School to achieve this distinction – MGH's Rakesh K. Jain, PhD, director of the Steele Laboratory for Tumor Biology, also has been elected to all three.

"I am deeply honored to be elected to the National Academy of Engineering and to have the rare good fortune of being a member of the other two branches of the national academies as well," says Brown. "These accolades are really a testament to the creative accomplishments of the members of my research group and our collaborators in neuroscience data analysis and in the neuroscience of general anesthesia. I am truly indebted to them."

Brown is internationally renowned for his work developing statistical methods and signal-processing algorithms to study how the brain represents and transmits information, as well as for his research characterizing how anesthetic drugs create the states of general anesthesia.

Election to the National Academy of Engineering is among the highest professional distinctions accorded to an engineer. Academy membership honors those who have made outstanding contributions to "engineering research, practice or education, including, where appropriate, significant contributions to the engineering literature," and to the "pioneering of new and developing fields of technology, making major advancements in traditional fields of engineering, or developing/implementing innovative approaches to engineering education."

02.13.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

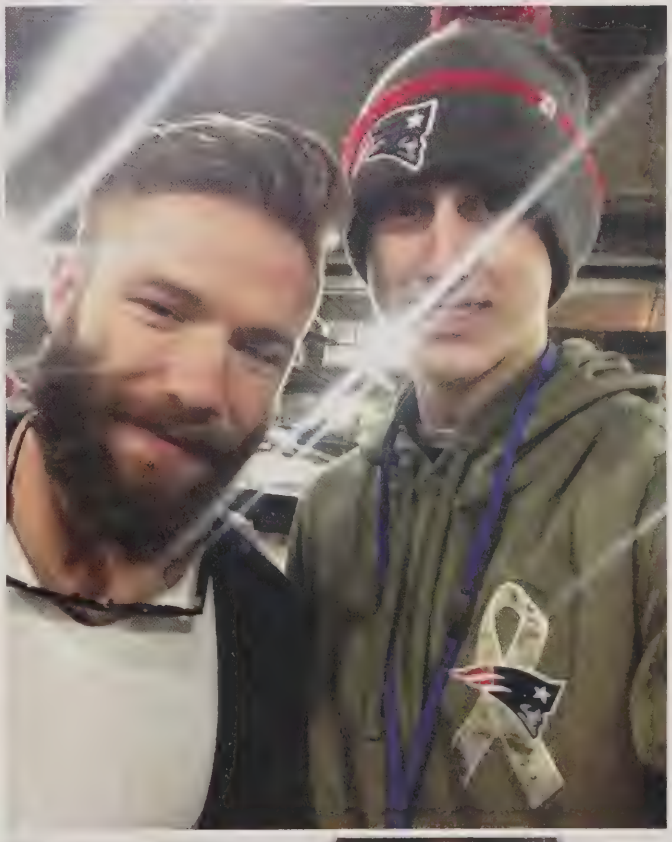
A duck boat ride to remember

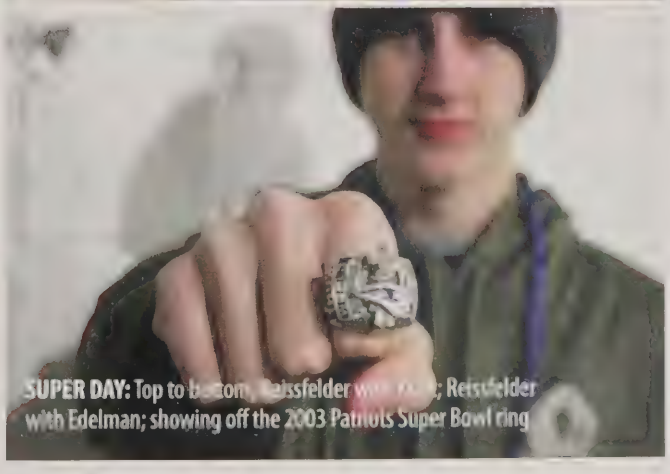
FOOTBALL IS A HUGE PART of 17-year-old Keith Reissfelder's life. When the high school quarterback was unable to play this past season while undergoing chemotherapy for a tumor in his femur and his knee, he was devastated. Although Reissfelder could not join his Braintree, Massachusetts teammates on the field last season, he was given a once-in-a-lifetime opportunity to join another team off the field last week.

Reissfelder was selected by several Mass General Hospital *for* Children (MGH*f*C) staff members to board a duck boat Feb. 5 for the New England Patriots Super Bowl XLIX victory parade. The Patriots organization approached MGH*f*C after the team's win to invite a patient to take part in the festivities. "I found out two days before the parade," Reissfelder says. When my parents called me I couldn't believe it. I didn't understand at first. I thought they were kidding, but when I found out they were serious I didn't know what to do."

"He deserves it," says Karen DaRocha, RN, Pediatric Hematology-Oncology Unit. "He is a kid that never complained about anything he had to do. He never once asked, 'Why me?' If anyone deserved this chance to celebrate the Patriots' Super Bowl win, it is Keith. I am thrilled for him!"

Before the start of the parade, Reissfelder, his girlfriend and her mother gathered in the Prudential Center parking garage to board the duck boat.
(Continued on page 3)





SUPER DAY: Top to bottom, Reissfelder with [illegible]; Reissfelder with Edelman; showing off the 2003 Patriots Super Bowl ring

A survivor's story: Uncovering the mystery of SCAD

WHEN DONNA GROGAN, 50, suffered her first heart attack in July 2007, it made no sense to her. She was an avid runner with no family history of heart disease. Grogan, a physician, was perplexed. "I was the picture of health – my cholesterol was normal. I didn't smoke, no diabetes, and I did everything to make my health a priority," she says. "But I suffered an ST-segment elevation myocardial infarction – a heart attack caused by a blocked coronary artery – and was treated with two stents."

GROGAN

Nearly seven years to the day on a Monday morning in July 2014, Grogan suffered her second heart attack. Recurrent symptoms triggered a voice in her head telling her to go to the nearest hospital. At the MGH Emergency Department, her electrocardiogram
(Continued on page 4)

A match made at the MGH

LOVE SOMETIMES SPARKS in unusual places or mysterious ways. Sometimes it takes years to evolve, and other times it is instant. Many MGH staff members have met their match while working together – or from afar – right here at the hospital, and a few share their stories.

ACROSS THE OPERATING ROOM TABLE

Andrew L. Warshaw, MD, MGH surgeon-in-chief emeritus, and Brenda Warshaw, RN

BRENDA AND I met in the old Baker operating room in the late 1970s, she as a hospital scrub nurse and I as a staff surgeon. A few years later, I hired her as my 'private scrub' – at the time a common phenomenon that greatly increased efficiency but which has since been discontinued at the MGH. Brenda became a fixture in my office and hospital routine as well, providing continuity, familiarity and comfort to anxious patients facing surgery and recovery from serious illness. In 1986, we married in the MGH chapel, attended by some of my patients with their IVs on rolling poles. Over the years, she left the operating room but continued as my office nurse, delighting in becoming a bit of a mother hen to a generation of surgical residents and fellows in my laboratory. Brenda retired after 35 years as an MGH nurse about the time I stepped down as chief of Surgery in 2011. We now have 13 wonderful grandchildren, nine born at the MGH.

A MEETING OF MINDS AND HEART

Yvonne Chasser, MD, and Brian Barnett, MD, residents in the MGH Department of Psychiatry

BRIAN AND I met during orientation week at the MGH, just before the start of our intern year in the Psychiatry program. Right away, we realized we shared many common interests and made each other laugh. However, being co-residents in a program of just 16 people and dating at the same time seemed like it would come with some pressure and unique obstacles. But my mom told me to 'go for it!' when Brian had asked me out on a date. Although it has been difficult at times with our busy schedules and the often challenging nature of our work, I can't imagine having gone through residency without him by my side, leaving funny Post-it notes on my desk or making a run to Coffee Central. We have grown together through frustrations and losses – both as individuals and as a couple – and we are stronger than before. This August, we are both very excited to be getting married and we couldn't be more grateful that fate helped us find love at the MGH.

LOVE BLOSSOMS ON BIGELOW 13

Lisa Ireland, RN, and Frank Ireland, RN, of the Sumner Redstone Burn Center on Ellison 14

MY HUSBAND AND I met in 1985 on the Burn Intensive Care Unit (ICU), formerly Bigelow 13 and now Ellison 14. We are both nurses and have worked there together for 30 years – it is our second family. When I met Frank, he was a part-time operations associate, and all of us on Bigelow 13 soon convinced him to go back to school to become a nurse. He became a burn technician while getting his nursing degree, and then after graduation he became a nurse on the floor. We worked most of our shifts together, walking to work together from Charlestown and 'smooching' on the elevator as we started each day. Then three children came, and we began a new phase of life – two ships passing in the day. He would work the day shift, and I would do the evenings part-time. For years on some weekends I would trek the kids in before my 3 pm shift and trade them

off to him as he completed his, so the MGH became a second family to them as well. Imagine how great it is to be tired after a shift or a week's work and your spouse can understand completely how you feel!

A WORK OF HEART

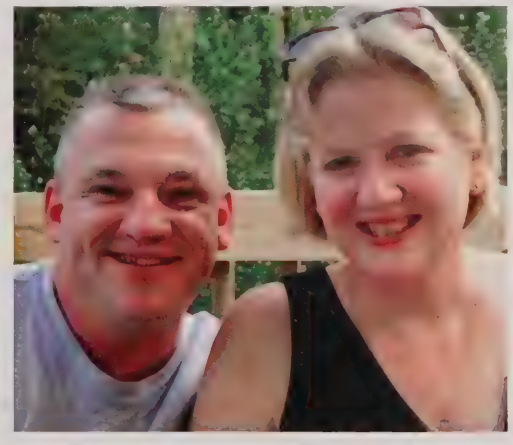
Julie Donahue, RN, and Dean M. Donahue, MD, Thoracic Surgery

DEAN WAS FINISHING his residency in cardiothoracic surgery, and I was an RN on the Cardiac Surgery Step-down Unit on Ellison 8 when we met. I had been working all night in the mini-unit, where we cared for more acute patients transitioning from the ICU and the floor. My patient was having issues that needed to be discussed, and we were eager to hear from the residents during rounds. He came around the corner like Dr. McDreamy with the blue eyes to go with the blue scrubs, and it was love at first sight. Somehow my yellow precaution gown must have enticed him too. Many patients and many rounds later, we had our first date at Harvard Gardens (HG's as we fondly call it). Dean thinks maybe it was their 'Beacon Burger' that worked its magic. We sipped beer and ate burgers and found all the things we had in common. With nearly 15 years of marriage and four kids between us, we have found working in similar professions at the MGH to be a wonderful way to keep the love alive. We now work together in the same office, providing care to patients from around the country who suffer from Thoracic Outlet Syndrome. We love working together to provide care to patients just as we did when we first met.

BUILDING A FOUNDATION FOR LOVE

Susan Belton, MSN, RN, CNL, staff nurse on Ellison 6, and Michael Belton, carpenter in Buildings and Grounds

MY HUSBAND MICHAEL AND I met in 1987 when he was working as a carpenter and I as a unit secretary on Baker 9. We were married in 1991, and have three boys. He celebrated his 30th year at the MGH last year. And, I continue to work per diem as an RN on Ellison 6. We celebrated our first date at the 'Flying Machine' rooftop lounge nightclub at the Holiday Inn on Blossom Street. We spent many Friday evenings by the Charles at MGH softball games, as Michael and two of his brothers played in the league. We had more than 200 guests at our wedding, many of whom were MGH employees – including the best man, Marty Doherty, who continues to work in the MGH Cath Lab, and my sister, Pattie Gill, RN, PACU, who also has worked at the MGH since 1987. ■



SEEING RED: MGH staff – many of whom work in the Corrigan Minehan Heart Center, including the Advanced Heart Failure team and Bigelow 8 Outpatient Cardiology and Cardiac Unit Associates – joined the American Heart Association's Go Red for Women movement Feb. 6 to show their support for heart health. Heart Center staff also hosted an information table near Coffee Central, which featured heart wheel with facts about heart health.

— *Ride to remember*

(Continued from page 1)

Much to his surprise and delight, the New England Patriots players were waiting in the same area. Wide receiver Danny Amendola and Reissfelder's favorite player, wide receiver Julian Edelman, signed his Super Bowl hat. Reissfelder says he also spoke to owner Robert Kraft and congratulated him on the Super Bowl win.

"It was crazy. I can't even describe it," Reissfelder says. "I was in the yellow duck boat in front of (tight end) Rob Gronkowski. I was watching him dance. It was really cool."

When the parade ended, Reissfelder mistakenly found himself on the players' bus, which was headed back to Foxboro. He bumped into offensive back Vince Wilfork and gave him a nervous "hello" before hopping in a taxi back to Braintree.

"I want to thank everyone at the MGH for thinking of me and giving me the opportunity to do this," Reissfelder said. "It's amazing what the hospital does for people. Things like this make you forget about everything that you're going through. It gets your mind off things. I can't thank everyone enough." ■

02.13.15

MGH HOTLINE

MGH Hotline will not publish Feb. 20 because of the Presidents Day holiday. The regular publication schedule will resume Feb. 27.

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0771

ASSISTANT EDITOR
Emily Williams
617-724-2753

EMAIL

MAIL

MGH Hotline is a publication of the MGH Public Affairs Office.

Printed by MGH Printing Services unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

Black and gold go red and pink

FEELING THE LOVE: Valentine's Day came a bit early for Olivia, 2, and other patients at MassGeneral Hospital *for* Children (MGH*f*C). On Feb. 5, Boston Bruins players – from left, Patrice Bergeron, Tory Krug and Daniel Paille – scored major points with young fans as they carted a little red wagon room-to-room, filled with Bruins gift bags, Valentines and long-stemmed roses.

Celebrating victory

TOP NOTCH CARE: Matthew Provencher, MD, chief of the MGH Sports Medicine Service and medical director and head team physician for the New England Patriots, left, and Peter Asnis, MD, of Orthopædic Surgery and team physician for the Patriots, right, pose with quarterback Tom Brady after the Patriots Super Bowl victory over the Seattle Seahawks on Feb. 1. "The medical team for the New England Patriots had the privilege of being in Arizona providing medical care," Provencher says. "Throughout the season, a multidisciplinary team from the MGH provides a high level of care and clinical expertise in the realm of sports medicine for the Patriots. A huge thanks goes out to the MGH community and providers who gave outstanding care for the Patriots all season. "Also in attendance at the Super Bowl were MGHers who assisted in caring for the team: Paul Cusick, MD, internal medicine director for the Patriots, David Brown, MD, team trauma director, as well as Chris Vorys, MD, and Micheal O'Donnell, RN.

— *A survivor's story*

(Continued from page 1)

was normal, but blood work showed damage to the heart muscle, prompting the medical team to perform a cardiac catheterization. "My catheterization also showed evidence that I had a previous heart attack that I wasn't even aware of," Grogan adds.

While Grogan's heart attack symptoms were typical and included indigestion and shoulder discomfort, what was happening in her body was not. The artery blockage behind all of her heart attacks wasn't caused by a buildup of plaque, as is the case with most heart attacks. Grogan's blockage came from a piece of artery that had torn away, which is officially known as spontaneous coronary artery dissection, or SCAD.

"In most cases, the underlying cause of SCAD is unknown," says Malissa Wood, MD, co-director of the Corrigan Women's Heart Health Program. "The diagnosis of SCAD may be difficult to make in some patients, because many of them do not have typical risk factors for heart attack. Awareness of the symptoms of heart attack is crucial to allow for a timely presentation and diagnosis."

Following her diagnosis, Grogan was introduced to a team of MGH experts in cardiology, vascular medicine and genetics, who prescribed a conservative treatment plan for her, which included exercise and medical management. She also enrolled in the hospital's SCAD research registry. "Since we began this collaboration in 2013, we have had more than 35 patients enroll in our registry and that number is growing," says Wood. "We are the only hospital in Boston studying this very under-diagnosed disease. We hope to one day determine potential causes of the disease, as well as how to best manage this condition and improve the quality of life for patients with SCAD."

After nearly seven months under Wood's watchful eye, Grogan is healthy and back to full activity. She says she considers herself lucky and is grateful for every day she has with her husband and three children.

02.27.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Honoring pioneers past and present

INSPIRING INNOVATIONS: Warshaw, left, congratulates Masiakos

QUALITY AND COST are two of the most important drivers of innovation in health care today. At the MGH, the Bowditch Prize is awarded annually to individuals or groups who are able to achieve substantial improvement in both of these areas. Established in 2000, the prize is named for Nathaniel Bowditch, a pioneer in celestial navigation who helped to raise funds for the construction of the MGH in the 1800s. His book *The New American Practical Navigator* led to safer and more efficient travel and is still carried aboard every commissioned U.S. naval vessel today.

It is no surprise that similarly creative and significant innovations are plentiful here at the MGH. With the numerous peer nominations for a diverse set of projects, the selection committee consistently faces a difficult decision. At the Feb. 13 award ceremony, 16 individuals and groups were recognized for their work. Any nominee would have made a worthy recipient, but the decision to recognize Peter Masiakos, MD, director of Pediatric Trauma Services, represented a slightly different approach by the selection committee.

"The Bowditch Award typically recognizes quality improvement efforts associated with cost savings at this hospital, however this year the committee has instead recognized Dr. Masiakos for his work, which has reached far beyond the walls of the MGH," said Andrew Warshaw, MD, surgeon-in-chief emeritus and chair of the Bowditch Prize Committee.

Masiakos was honored for his efforts to revise state law related to all-terrain vehicle (ATV) operation. Under the law, which went into effect in October 2010, children under the age of 14 are not allowed to ride ATVs. As a result, Masiakos said, the MGH Pediatric

(Continued on page 4)

MGH hosts community dialogue on race

IT WAS A STANDING-ROOM-ONLY CROWD in the O'Keeffe Auditorium during the hospital's first "MGH Community Dialogue on Race: How Do We Move Forward?" program. The Feb. 12 event featured a TED Talk video featuring national diversity consultant Verna Myers, followed by a facilitated discussion with a panel of MGH leaders and experts in the field of diversity and inclusion.

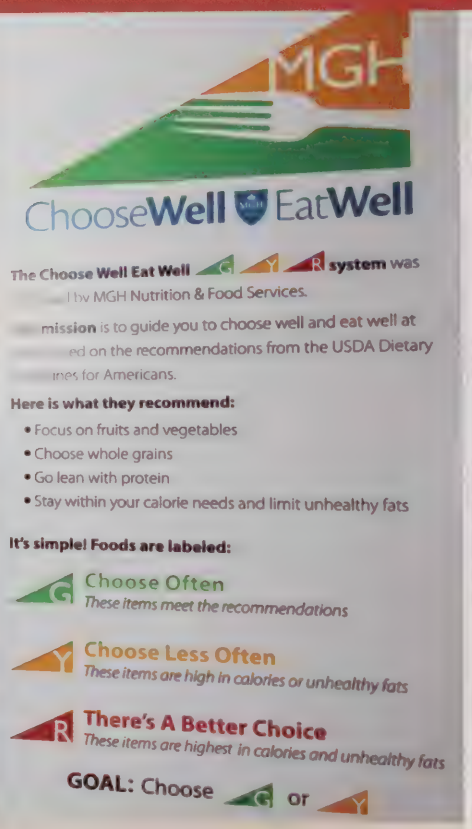
"Being seen, being heard, being valued, being respected – these are core experiences that each of us desires, whatever the situation, whether at home or work," said co-facilitator Sherri-Ann Burnett-Bowie, MD, of the MGH Endocrine Division, co-chair of the Department of Medicine Diversity and Inclusion Board, and associate director of the Center for Diversity and Inclusion. "As individuals we want to be treated equally. And more importantly we desire equity for those we love. So it's very hard to admit that inequality exists, and it's even harder to acknowledge that inequality exists if you have not personally experienced it or to acknowledge that your experience may be very different from someone else's and both can be true."

Much of the hour-long event's discussion centered on the topic of unconscious bias, where one associates particular qualities or attributes to members of a certain social group. Women, racial minorities and individuals who are lesbian, gay, bisexual or transgender are more vulnerable to negative

(Continued on page 4)

MOVING FORWARD: Panelists respond to questions

CLEARER CHOICES:
New signs at Tea Leaves and Coffee Beans


MGH
ChooseWell EatWell
The Choose Well Eat Well system was
l by MGH Nutrition & Food Services.
mission is to guide you to choose well and eat well at
ed on the recommendations from the USDA Dietary
ines for Americans.
Here is what they recommend:
• Focus on fruits and vegetables
• Choose whole grains
• Go lean with protein
• Stay within your calorie needs and limit unhealthy fats
It's simple! Foods are labeled:
Choose Often
These items meet the recommendations
Choose Less Often
These items are high in calories or unhealthy fats
There's A Better Choice
These items are highest in calories and unhealthy fats
GOAL: Choose or

Eat right everywhere at the MGH

THE SIMPLE COLORS of a traffic light now guide cafeteria-goers at every MGH eatery. The success of the Choose Well, Eat Well traffic light labeling program – launched in the MGH Eat Street Café in 2010 – recently earned the hospital a grant from the Donaghue Foundation to expand the program to reach all patients and visitors.

"It has always been my wish to have it at all cafeterias," says Anne Thorndike, MD, of the MGH Division of General Medicine. "We have done a lot of research to make the healthy things more prominent and available, and we have found over the years people were choosing more green items than red items."

Developed and monitored by Thorndike, along with other MGH physicians, dietitians and health policy experts, Choose Well, Eat Well is based on a nutrition label color-coding system – green for healthy, yellow for less healthy and red for items with little or no nutritional value – and the careful positioning of food and beverages in display cases. Expansion to locations including Coffee Central and Coffee South has prompted the research team to focus on promoting healthy beverages including some targeted messaging for coffee drinks and healthy breakfast options.

"A lot of behind-the-scenes work has gone on to make this program possible," says Thorndike. "We even had to reprogram the cash registers to keep track of what people are buying."

The change has been a challenge for the Department of Nutrition and Food Services staff, but Latoya Brewster, retail operations manager, says it has been a welcome one. "We've enlisted the help of nutritionists to code menu items, technology systems managers to update our software allowing us to label menu items and products, and our production staff, who have been diligently testing new green recipes and training staff. The program has been a true team effort across the department to create a system that makes choosing healthy food options simple."

IN MEMORIAM

Robert Carey, MD

ROBERT CAREY, MD, a longtime oncologist at the MGH, died Feb. 17 at the age of 80. Carey is remembered by his colleagues and friends as a caring physician, dedicated researcher and pioneer in establishing standards of rigorous clinical research in cancer.

"Bob's most enduring legacy was his heroic devotion to his patients," says Bruce Chabner, MD, director of Clinical Research in the MGH Cancer Center. "Bob laid the ground work – along with fellow physicians Jerry Younger and Don Kaufman – for the outstanding clinical oncology unit at the MGH, one of the finest in the country. He and his colleagues established a tradition of hard work and dedication to patients, a devotion to clinical research and clinical trials, and a remarkable ability to link their practices to surgical and radiation oncology colleagues. Nearly 40 years ago, Bob catalyzed an effort to build a dedicated oncology unit on the old Baker 5. Doctors and nurses from that era remember him rounding on patients seven days a week, often late at night, on that new unit. His devotion to patients continued throughout his career and served as a wonderful example for our trainees and junior faculty."

CAREY AT THE MGH IN 1967

Carey graduated from Harvard Medical School and then became an intern and resident at the MGH from 1959 to 1961. After working at the National Cancer Institute as a researcher and completing a senior residency program at Buffalo General Hospital and a medical oncology fellowship program at Roswell Park, Carey returned to the MGH in 1965 and worked here until his retirement in 2003.

According to David Ryan, MD, chief of Hematology-Oncology, Carey was an integral part of a team that helped establish daunorubicin and Ara-C as important components of induction therapy for acute myeloid leukemia – a regimen that remains standard today – and helped establish the standard of combined modality therapy for small cell carcinoma of the lung and esophageal cancer, as well as the standards of chemotherapy and radiation for localized non-small cell carcinoma of the lung.

"We celebrate his legacy of doing all that we can for our patients, whether it is the world's most technologically advanced treatments, clinical trials or compassionate, supportive care," Ryan says. "Bob was truly a giant in our midst. We miss him, but we also honor the gift that he gave us of a life well-lived."

A memorial service will be held at the Pilgrim Church UCC Congregational, 25 South Main Street (Route 27), Sherborn, Massachusetts on Feb. 28 at 10 am.

'Speak Up for Safety'

MINEHART

THE MGH WILL PARTICIPATE in National Patient Safety Awareness week, March 8 through March 14. The week-long education and awareness-building campaign includes a keynote presentation, "Overcoming Barriers to Effective Communication," at noon on March 12 in the O'Keeffe Auditorium with speakers May Pian-Smith, MD, and Rebecca Minehart, MD, both of the Department of Anesthesia, Critical Care and Pain Medicine. Here, Minehart shares the importance of this year's theme, Speak Up for Safety.

What are some of the greatest concerns or issues related to patient safety you hear from staff and patients?

The majority of concerns I hear relate to communication, especially as a large team, and not feeling "all on the same page." Speaking up certainly has potential to address this when members of the team have questions about the bigger picture or the treatment plan for the patient. So many decisions are fluid, due to the nature of our work, and open, clear lines of communication with both patients and health care team members are critical.

How can health care providers encourage their patients and community to speak up?

Some of the most common reasons people do not speak up are because they feel less empowered. They feel like they must not know the answer, that the health care provider is the expert or they do not have the words to be effective. I believe that the first step many people should take is to have self-respect – that is, to realize they have a legitimate voice and any questions they have are valid and should be voiced. While we typically discuss speaking up for safety reasons, asking questions for your own knowledge is a form of speaking up, and the more people ask questions in lower-stakes situations, I believe the easier it is to speak up when the stakes are higher.

What kinds of questions should patients ask to improve communication and ensure safety?

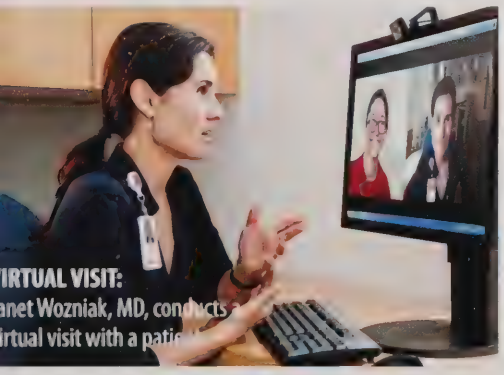
Any clarifying questions are important, even asking, "Can you explain that a little more to me?" and "What are the next steps?" are helpful ways to promote better communication. If a patient has a concern about safety, he or she can preface that concern by being very explicit. One example is to say, "I'm having trouble understanding what the treatment plan is, and I'm concerned about the safety of it. Can we take a moment to discuss the next steps?" This should be a signal to the provider that more dialogue is needed.

What advice would you offer colleagues and students with regard to patient safety?

If a question even crosses your mind, you should ask it aloud. Chances are there are others with the same question who may also benefit from the explanation. I have never regretted the times when I spoke up about something that concerned me, but the times when I haven't spoken up have stayed with me, reminders of times I have regretted not using my voice and sharing my ideas. At times, it feels like a "cost," to share your concerns while feeling like you don't have all the answers yourself, but the silence is so much costlier in the end.

TeleHealth helps blizzard-bound patients continue care

IN LIGHT OF THE RECORD-BREAKING SNOWFALL throughout the Boston area, TeleHealth is proving to be an increasingly valuable tool for patients


IRTUAL VISIT:
anet Wozniak, MD, con
irtual visit with a pati

and clinicians. The program – the delivery of health-related services and information via telecommunications technologies – enables both parties to connect more regularly and conveniently regardless of what Mother Nature has in store.

"Thanks to the efforts initiated by Lee Schwamm, MD, executive vice chairman of Neurology, the MGH's TeleStroke network has been using videoconferencing technology to provide doctor-to-doctor virtual consults to assess and treat strokes in community hospital emergency departments across New England since 2001," says Sarah Sossong, director of MGH TeleHealth. "Providing visits directly to patients in the home – known as the Virtual Visits Program – is a unique offering."

TeleHealth picks up where the house calls of the mid-20th century left off. There was a time when house calls by physicians used to be common practice in towns and cities across the country. When a person got sick, the family doctor – who today would be a primary care physician – would pay a visit to the patient's home, assess the condition and make recommendations for treatment. TeleHealth takes this concept to a new level using patient-friendly technology.

The creation of the Virtual Visits Program was born in the wake of a blizzard that hit the Boston area in February 2013. Today, the program is offered widely to patients across primary care and specialty departments. At the height of the recent Jan. 27 blizzard, MGH doctors were able to virtually meet with 20 patients who otherwise would have needed to come to the MGH, while more than 100 virtual visits were conducted over the entire week.

On average, the MGH conducts 70 virtual visits per week – some 300 monthly – across 10 clinical teams – the Cancer Center, Cardiology, Neurology, Pediatrics, Primary Care, Dermatology, Pain Management, Surgery, Urology and Psychiatry.

"We are one of the only hospitals in Massachusetts offering this specific type of visit," says Sossong. "Allowing patients to see their physician on days in which weather or dangerous travel conditions preclude in-person visits is just one of the ways in which we are using the Virtual Visits Program. The majority of these visits take place within a patient's home, though some of them are conducted in a post-acute rehab setting or at smaller community hospitals closer to the patient's home."

Further expansions are likely as the Virtual Visits Program continues to mature and provide a convenient and reliable way for patients to connect with doctors during events like the recent snowstorms, their messy aftermath and on a daily basis. ■

02.27.15

MGH HOTLINE

Announcements available online
To read this week's "What's Happening" items, visit www.massgeneral.org/news/hotline

Submit news tips and story ideas to MGH Hotline

EDITOR
Colleen Marshall Delaney
617-726-0275

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

GIFTS THAT KEEP ON GIVING: Spirit Halloween SuperStores representatives recently presented the MassGeneral Hospital *for* Children (MGH*f*C) Child Life Department with a check for $34,985 as part of the company's Spirit of Children program. Every year during the Halloween season, local stores conduct in-store fundraising for area hospital child life departments. Last October, Spirit Halloween Superstores – the nation's largest seasonal Halloween retailer – threw a Halloween party for MGH*f*C patients and siblings, which included free costumes, decorations, arts and crafts, and a visit from Batman.

— Bowditch Award

(Continued from page 1)

Trauma Service saw 18 fewer head injuries in 2011, which translated into an estimated savings of $34 million that otherwise would have gone toward long-term care for children with ATV-related injuries. Masiakos worked closely with former Senate President Therese Murray and Sen. Steven Baddour who were both present for the award ceremony – to enact this law and continues to speak about this issue around the country. "I believe this is a perfect example of how a physician's role as healer and educator can be effectively extended into the political process," Masiakos said. Since the team's first success, four additional injury prevention laws have been passed as a result of their work.

Added Warshaw, "This change in legislation will prevent hundreds of serious and costly pediatric injuries annually across the state and, as Dr. Masiakos continues to speak on this issue, across the nation. This is what the MGH is all about, and I think it is something to be proud of." ■

Precious pear tree

WEATHERING WINTER: The oldest living fruit tree in America – the Endecott Pear Tree, located at the Mass General/North Shore Center for Outpatient Care – may be surrounded by historic amounts of snow, but it continues to stand tall. This should come as no surprise to those who know the tree's rich history and how it has withstood more than 400 years of New England weather.

— Dialogue on race

(Continued from page 1)

forms of unconscious bias, Burnett-Bowie said. "Unconscious bias is as natural as breathing," she said. "This is not making an excuse; this is not blame-sharing. This is understanding a process and if we don't identify it, we can't start making steps to change it."

During the program, MGH President Peter L. Slavin, MD, joined fellow panelists – Jeff Davis, senior vice president for Human Resources; Utibe Essien, MD, resident in the Department of Medicine; Alex Green, MD, associate director of the Disparities Solutions Center; Bonnie Michelman, director of Police, Security and Outside Services; Elena Olson, executive director of the Center for Diversity and Inclusion; and Deborah Washington, RN, director of Patient Care Services Diversity – to discuss questions and comments submitted by staff in advance of the event. Alexy Arauz Boudreau, MD, associate director of Population Health for MassGeneral Hospital *for* Children and associate director for the MGH Center for Diversity and Inclusion, served as co-facilitator.

Further discussions about race relations and disparities are planned for the future. "It is my hope that this meeting will begin an important discussion here at the hospital on race and race relations and help us as individuals and us as a community to figure out a way to move forward at this important time," Slavin said. "I don't view this as the last discussion we are going to have on this subject nor do I expect any miracles to come out of this meeting. It's really just the first of what I expect will be a number of conversations and efforts to make progress on this important issue."

This event was recorded and can be viewed by visiting the MGH intranet at *intranet.massgeneral.org*.

03.06.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

DIFFICULT DIET: Left, a typical example of a breakfast a person on a ketogenic diet might eat. Right, Fung, left, with Joel Salinas, MD, pediatric neurology chief resident, are two of the MGH physicians participating in the "Keto March Madness" event.

Neurology residents practice what they preach

SEVERAL MGH AND MassGeneral Hospital *for* Children (MGH*f*C) neurologists are saying goodbye to carbohydrates and sweets for the month. In order to support their patients, spread awareness about the effectiveness of dietary therapy and raise funds for the department, six neurologists – both pediatric and adult – are participating in a Low Glycemic Index Therapy (LGIT) diet, which often is used in the treatment of pediatric epilepsy patients. The dietary challenge has been dubbed "Keto March Madness."

Now used internationally, LGIT was developed at the MGH in 2002 as an alternative to the more stringent ketogenic diet, which has proven to be an effective treatment of epilepsy. The ketogenic diet is a high-fat, adequate-protein, low-carbohydrate diet, comparable to the Atkins Diet. A low glycemic diet is similar to the South Beach diet, and permits a greater carbohydrate intake than the ketogenic diet. Researchers continue to investigate why the diet works so well in treating some epilepsy patients.

"We don't know the mechanism of how it works. It continues to be researched, but we do know that it works. It is terrific that the neurologists are willing to go through with this protocol because it is not easy to do," says Heidi Pfeifer, RD, LDN, clinical dietician specialist at the MGH. Pfeifer will assist the group throughout their challenge and participate as well. "They are extremely busy as training clinicians, but they are trying to make people aware of how effective this treatment is. This will raise awareness and give the neurologists an important perspective that will help them relate to their patients."

The participants started the challenge March 3. Each has been

(Continued on page 4)

MGH patient finds relief after months of debilitating pain

ALBERT ARILLOTTA did not think things could get much worse after he was diagnosed with cancer. A father of three children and an avid golfer, 52-year-old Arillotta enjoyed a healthy, active lifestyle until the day he received shocking news after a CT scan: he had kidney cancer. "It was like someone hit me with a hammer," he recalls.

Arillotta had surgery at the MGH to remove his kidney. About a month later, he began experiencing severe lower back pain. "The pain was unbearable. I couldn't explain it, it was off the chart," he says. An MRI revealed that the cancer had spread to his bones.

Still reeling from the news and facing additional cancer treatment, Arillotta also was living in constant pain. He slept in a chair to avoid the agony of getting

(Continued on page 4)

IN MEMORIAM

Nancy Stackhouse

NANCY STACKHOUSE, a beloved member of the MGH family for 35 years, died Feb. 16 at the age of 55. Stackhouse worked as an administrative assistant at the MGH since 1995, most recently providing support in Radiation Oncology.

"Nancy was always thoughtful toward her colleagues. She never failed to ask how all of our children were and showed concern if they were ever ill," says Jennifer Fitzgerald, executive assistant in Radiation Oncology. "Nancy understood that there is more to each of us than the job that brought us together each day. She always took the time to notice if someone was upset or needed assistance and offered to do what she could to help."

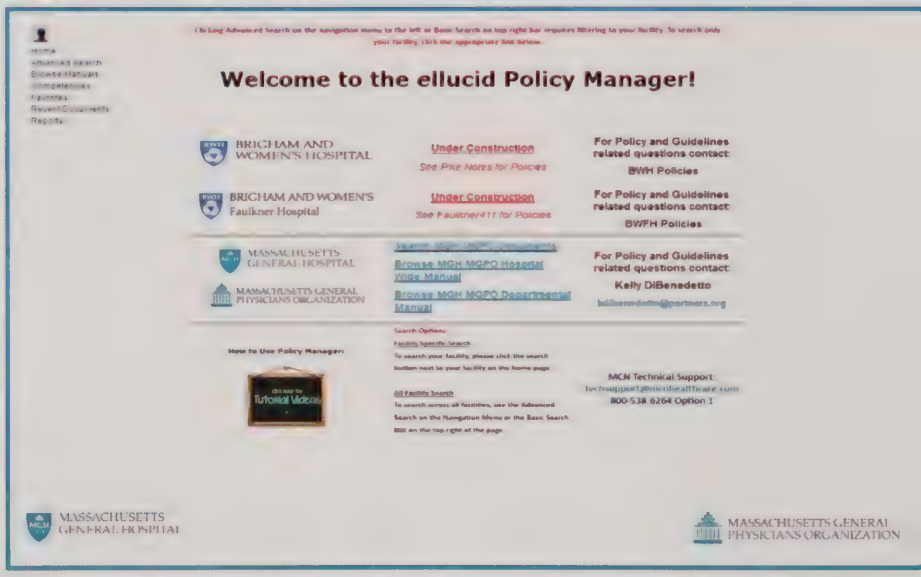
Colleagues say Stackhouse's passion and devotion to her job were topped only by her love and dedication to family – especially her seven brothers and sisters and 20 nieces and nephews. Also in the running for her favorite things were Jimmy Buffett's music and tropical vacations in Key West. "We recently had a tropical escape day in the office where people dressed in tropical gear and wore leis, and we had a non-alcoholic margarita machine. Nancy so enjoyed it. She was just so happy – she was absolutely glowing," says Claire Cronin, administrative manager of Radiation Oncology.

Stackhouse graduated from Wakefield High School as a member of the class of 1977 and later graduated from Bunker Hill Community College, before coming to the MGH.

Donna Cutillo, executive assistant for Partners HealthCare Corporate Administration, fondly remembers her friend's fascinating laugh and how she nicknamed her "Giggles" when they were both early in their careers at the MGH. "I always introduced her as Giggles to everyone we worked with," Cutillo says. "We developed a very unique friendship, one that lasted throughout the years. As people in a hospital setting know, you often develop a family-type relationship with certain people. She was part of my wedding as a guestbook attendant. She was just a good person, very trustworthy and was just very, very special to all of us."

Funeral services have been held.

ANNUAL HONOR:
Stephen Calderwood, MD, chief of Infectious Diseases and vice chair of the MGH Department of Medicine, left, was honored with the John T. Potts Jr., MD, Faculty Mentoring Award during a Feb. 11 ceremony in the Trustees Room. Sponsored by the Center for Faculty Development, the annual award recognizes a senior faculty member with 10 or more years of mentoring experience who has demonstrated excellence in helping junior faculty and trainees succeed. It was created to honor Potts, right, an adviser and guide to countless MGH trainees and faculty, who served as chair of the Department of Medicine and physician-in-chief from 1981 to 1996 and director of Research from 1996 to 2004. "The MGH is a place that attracts really bright and accomplished people, but people who are also able to interact and teach each other in a way that really fosters learning and improves us all," said Calderwood. "John Potts was one of my most important mentors, so to receive a mentorship award in his name is very special."


Welcome to the ellucid Policy Manager!
BRIGHAM AND WOMEN'S HOSPITAL
Under Construction
See Pink Notes for Policies
For Policy and Guidelines related questions contact:
BWH Policies
BRIGHAM AND WOMEN'S Faulkner Hospital
Under Construction
See Faulkner411 for Policies
For Policy and Guidelines related questions contact:
BWFH Policies
MASSACHUSETTS GENERAL HOSPITAL
MASSACHUSETTS GENERAL PHYSICIANS ORGANIZATION
Browse MGH MGPO Hospital Wide Manual
Browse MGH MGPO Departmental Manual
For Policy and Guidelines related questions contact:
Kelly DiBenedetto
How to Use Policy Manager:
Tutorial Videos
MCN Technical Support:
800-538 6264 Option 1
MASSACHUSETTS GENERAL HOSPITAL
MASSACHUSETTS GENERAL PHYSICIANS ORGANIZATION

Going live with ellucid Policy Manager

ON FEB. 23, the MGH introduced its new policy manager system ellucid, which replaced the former system, Trove. All current hospitalwide policies are found in ellucid, and some departmental policies will be added in the upcoming months.

"After many months of working diligently on preparing policies and procedures, our new policy manager system, ellucid, is ready for everyone to use. We are very excited to share this new policy manager system with all staff," says Kelly DiBenedetto, project manager in the Compliance Office.

DiBenedetto says ellucid offers some new features: advanced searching, recently viewed documents and the ability to view Brigham and Women's Hospital and Brigham and Women's Faulkner Hospital policies in addition to MGH policies and procedures. There also is 24-hour access to online video tutorials for quick refreshers on using the ellucid policy manager.

For more information, contact Kelly DiBenedetto at *kdibenedetto@partners.org* or 617-643-5493 or Julia C. Austin at *jcaustin@partners.org* or 617-726-5109. ■

Showcasing Excellence Every Day at the MGH

MGH STAFF WELCOME the opportunity to showcase Excellence Every Day – the hospital's commitment to providing the highest quality and safest care that meets or exceeds all standards set by the hospital and external organizations. In anticipation of the MGH's triennial visit by Joint Commission surveyors, an Ambulatory Joint Commission Educational Fair is scheduled to take place from 9 am to 2 pm on March 10 in the Thier Conference Room. This fair is sponsored by MGH/MGPO Practice Support in collaboration with participating MGH departments.

All outpatient practice role groups are invited to attend this event and speak with subject matter experts from various departments who will share information regarding ways to ensure compliance. Attendees can pick up helpful teaching materials and training packets to learn more about the weeklong, unannounced Joint Commission visit. The fair also will include raffles, freebies and food.

Did you know?

The Excellence Every Day Communications Subcommittee has created a humorous video reminding staff that proper hand hygiene is always a top priority at the MGH. Watch it by visiting the MGH YouTube channel at *www.youtube.com/MassGeneralHospital.*

As always, remember to visit the Excellence Every Day intranet site for more information in the coming weeks at *intranet.massgeneral.org/excellenceeveryday/.* ■

CLEAN YOUR HANDS:
A scene from the hand hygiene video

Turn It Around youth group organizes drive to collect hats and gloves

IN COLLABORATION WITH the Boston Public Health Commission, members of the Turn It Around youth group recently organized a hat and glove collection drive to help the homeless and individuals struggling with substance use disorder in Boston stay a bit warmer during this harsh winter.

The group – launched by the Charlestown Substance Abuse Coalition in 2013 to raise awareness of the dangers of prescription drug misuse in Charlestown – recently delivered a collection of 80 hats, 80 pairs of gloves, 80 pairs of socks and 80 scarves, along with 150 pairs of boots to the Woods-Mullen Shelter in Boston. This emergency shelter offers food, clothing, health care and case management service to people in need.

"The group launched the drive following the closure of the Long Island shelter and subsequent displacement of homeless men and women," says Sarah Coughlin, director of the Charlestown Substance Abuse Coalition. "Along with winter clothing, cash donations also were accepted to purchase additional hats and gloves. The youth worked extremely hard in planning the event – coming up with flyer ideas, assigning tasks, discussing outreach and planning logistics for the collection day."

The Turn It Around youth group is funded through the Charlestown Substance Abuse Coalition – supported by the MGH Center for Community Health Improvement – along with grants from the Drug-Free Communities Support Program through the Office of National Drug Control Policy and from the American Medical Association.

KEEPING WARM:
Turn It Around youth group members at the collection drive

MGH HOTLINE

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Run for MGH T-shirts available

SHOWING SUPPORT: The 2015 Boston Marathon is quickly approaching, and there are many ways staff can show their support for the hundreds of runners who are running in support of the hospital. One way is to purchase an official MGH Marathon Team T-shirt for $26.20, available online at *www.runformgh.org/tshirt* or in the MGH General Store. Supporters are encouraged to take photos wearing the shirt and post them with the hashtag *#run4mgh*. For more information about the marathon program, visit *giving.massgeneral.org/boston-marathon/*.

— *Keto March Madness*

(Continued from page 1)

assigned a small group of patients who will act as "coaches" to guide them through the diet challenge. They also will keep food logs throughout their journey and in early April will compare their logs to see which foods they most consumed.

Elizabeth Thiele, MD, PhD, director of the MGH*f*C Pediatric Epilepsy Program, says parents of patients have noted that the diet can be difficult to maintain, especially for children, but also have called it a complete game-changer. "Parents have told me that although this diet is tough, there is nothing more difficult than watching your child have a seizure," Thiele says.

France Fung, MD, a pediatric neurology chief resident, says she was inspired to participate to obtain a better understanding of the challenges that her patients face while on the diet and also to spread awareness of the effectiveness of dietary therapy. "It can be disappointing for both families and the treating physician when seizures do not respond to multiple anti-convulsive medications. When dietary therapy is effective, it is very encouraging to both parties involved," Fung says. "It helps restore the hope that the patient will be able to continue on with their daily activities without being disrupted by multiple seizures. It can be even more rewarding when the diet is so effective that we're able to reduce medications down to one or none."
For more information, visit *http://bit.ly/1B5jWDN.* ■

— *MGH patient*

(Continued from page 1)

in and out of bed. After trying narcotics, steroid injections and a nerve block to control what he says felt like glass shards in his back, Arillotta was running out of options. His doctors asked him to consider surgery that would stabilize his bones with a metal plate.

Pleading for more choices for pain management, Arillotta was referred to Joshua Hirsch, MD, co-director of the neuroendovascular program and chief of minimally invasive spine surgery. "I was looking for an alternative to invasive surgery," Arillotta says.

Hirsch quickly zeroed in on the source of Arillotta's discomfort. He had suffered dozens of tiny fractures when the cancer spread, weakening the delicate bones in his lower back. Hirsch suggested vertebral augmentation, a minimally invasive approach to pain relief that uses a cement-like substance to repair fractures. Like other techniques using interventional radiology, augmentation delivers the targeted treatment through a small incision under image guidance.

The results were immediate. "The pain was gone," Arillotta reports of the procedure he calls his "Hail Mary." For the first time in months, he felt healthier and hopeful.

Today, less than a year after treatment, Arillotta is pain-free without medication and is back at his job in demolition construction. He walks with assistance but anticipates being able to golf again soon with the help of physical therapy.

"It's like baseball," Albert says when discussing his MGH care team. "If you don't have a great team, you won't go to the World Series."

03.13.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Honoring stars among us

PICTURE PERFECT: Amira Hamzic, RN, left, and Lyndsey Farrow, RN, both of the Operating Room Nurse Service, celebrate after being named as MGH Patient Safety Stars.

WHEN KELLY KONIZ-DOWNING, a patient care associate on Ellison 16, first received the email notifying her that she'd "won" something, she didn't open it. "We were told we were getting some spam sent to our emails, so I didn't want to open something from someone I didn't know in case it might be a virus," she says.

Koniz-Downing's reaction and her attentiveness and concern for safety were fitting as the email was a notification that she'd been selected as one of this year's Patient Safety Stars, recognizing her commitment to safety within the hospital. "There are a lot of us on the nursing staff who feel like Kelly really works hard to make sure our patients are safe and well taken care of," says Lee Ann Tata, RN, the unit's nursing director. She's very conscientious and is a tremendous asset for the hospital because of the kind, caring way she interacts with our patients."

Koniz-Downing was one of 50 staff members who, during the sixth annual Patient Safety Star Appreciation Breakfast, were nominated by their peers to honor their efforts to improve and enhance patient safety at the MGH. The ceremony, held March 11 in the East Garden Room, was part of a weeklong series of events recognizing National Patient Safety Awareness Week, March 9 to 13. "I felt really honored," Koniz-Downing says. "I was really happy and grateful."

During the ceremony's opening remarks, Elizabeth Mort, MD, senior vice president of Quality and Safety and chief quality officer,

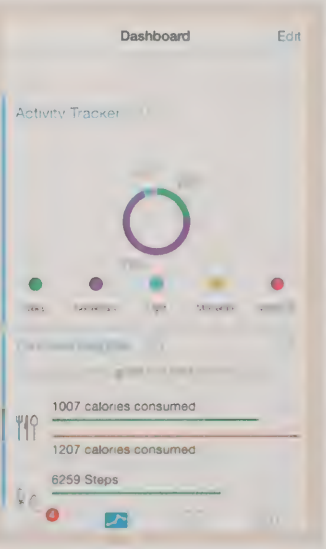
(Continued on page 2)

MGH researchers develop app to study type 2 diabetes

CAN SMARTPHONES change the way clinical research is conducted? A team from the MGH Center for Assessment Technology and Continuous Health (CATCH) may soon find out. On March 9, the CATCH team officially launched GlucoSuccess, an iPhone app created to help researchers study type 2 diabetes. The app, which was announced by Apple during the launch of its open-source framework ResearchKit, allows patients to track health behaviors important for type 2 diabetes, such as physical activity, diet and medication adherence.

"Our team is focused on harnessing the remarkable power of mobile technology to benefit patients with diabetes," says Stanley Shaw, MD, PhD, co-director of CATCH. "At the same time, the sensing, computing and communication capabilities of smartphones will enable us to create research datasets of unprecedented size and detail around specific health behaviors and how they relate to blood glucose in individuals and populations."

(Continued on page 4)



Weinstein looks forward to his 25th marathon

AT 68, RUNNING may have slowed down a bit for Howard Weinstein, MD, chief of the Hematology-Oncology Unit at MassGeneral Hospital *for* Children (MGH*f*C), but his passion for the Mass General Marathon Team "Fighting Kids Cancer ... One Step at a Time" continues to grow. This April will mark Weinstein's 25th time running the Boston Marathon and 17th as captain of the MGH team supporting pediatric hematology-oncology.

He completed his first Boston Marathon in 1990, achieving a long-held goal. As a child, Weinstein suffered from asthma and could not run much further than a mile. When the asthma stopped, running was possible. "I was motivated to continue, but I wanted to do more than run," he says. "I wanted to combine it with a fundraising effort."

When Weinstein was recruited to lead the MGH Pediatric Hematology-Oncology Program in 1996, he already had completed seven Boston races and was motivated to build a marathon team to support all aspects of pediatric cancer. "I started our team to honor our brave young patients who face their own marathons each and every day as they struggle to live long and healthy lives," he says. Funds from the Boston Marathon team support child life specialists, who help families manage the stress that illness and hospitalization can bring, as well as music and art therapy programs. With severe cuts in federal grant funding, the money also helps advance research to develop innovative treatments.

Thanks to John Hancock, the MGH obtained charity bib numbers for 10 runners in the 1998 Boston Marathon, and "Fighting Kids Cancer ... One Step at a Time" raised $45,000, which generated enthusiasm and momentum. Since then, the MGH's partnership with John Hancock has grown, and the team has expanded to its current size of more than 100 runners.

Many runners on the team participate in the Patient-Partner Program, a special opportunity to be paired with a pediatric patient. This year, Weinstein will run for Annie Flaherty, 5, who was diagnosed with neuroblastoma – an aggressive form of cancer. "She never fails to sparkle and make us laugh," Weinstein says. "I'm in awe of her courage and energy. I'm not able to train as much as I should, but thinking about Annie will motivate me to finish."

Weinstein understands the urgency of marathon funds for children who suffer from cancer – he has personally raised $1.2 million to support the Pediatric Hematology-Oncology Program at MGH*f*C. "I am so grateful for the support from our runners and donors who are dedicated to our team," Weinstein says. "The 25th is not my last – I will run as long as I'm physically able or until we cure all children of cancer."

For more information about this year's teams, visit *www.runformgh.org*.

New artwork brightens days

AT THE FOOT of every bed on the pediatric inpatient floors at MassGeneral Hospital *for* Children (MGH*f*C), watercolor trees and exotic animals come alive in brilliant brushstrokes. New artwork, created by students in grades 1 to 8 at the Waldorf School in Lexington, aims to have patients take their minds off of their hospital stay by inviting them to enjoy peaceful nature scenes and adventurous lands where animals roam.

Last year, when hospital staff were discussing new artwork for Ellison 17 and 18, Kerstin Zanger, MD, co-director of the division of Pediatric Hospital Medicine at MGH*f*C, contacted the elementary school to see if students would like to contribute.

"We wanted to provide artwork for kids by kids," said Zanger, whose two sons attend the school. "This artwork is meant to take patients to a different place. It's soothing, inspiring, relaxing, and it's really beautiful."

The paintings were created using a "wet-on-wet" technique. The students soak the paper in water and then paint directly on the wet paper. The result, said Zanger, is a beautiful painting with soft brushstrokes and vivid colors.

"Each class paints one image, like a tree or an animal. When hospital staff were selecting images, we were able to see the students' different variations and interpretations, which our patients really like," said Sacha Field, MS, CCLS, a child life specialist on Ellison 18. "It's wonderful for patients to see artwork created by kids who are close to their age and have similar interests." ■

— *Safety Stars*

(Continued from page 1)

thanked each and every staff member for their dedication and commitment to ensuring safety in all areas of the hospital. "Every day is patient safety awareness day at the MGH, and promoting a culture of safety is everyone's job. You and your stories are a testament to that and you should be very, very proud."

Other National Patient Safety Awareness Week events featured several presentations, including the keynote address, "Overcoming Barriers to Effective Communication," with speakers May Pian-Smith, MD, and Rebecca Minehart, MD, both of the Department of Anesthesia, Critical Care and Pain Medicine, and information tables in the White corridor, and at the Chelsea and Revere HealthCare Centers. ■

RACU introduces best practices for catheter use

DID YOU KNOW that the MGH's window for a visit from The Joint Commission is now open? When surveyors arrive between now and August, they will be looking at all the ways the MGH exhibits Excellence Every Day. One example is the hospital's success at consistently meeting the 2015 National Patient Safety Goals.

Units throughout the MGH have made meeting these goals part of their daily practice, and a new poster series hanging across from Coffee Central will highlight some of the best practices happening on the main campus as well at off-site locations.

National Patient Safety Goal No. 7 is preventing infections. MGH's Respiratory Acute Care Unit (RACU) on Bigelow 9 has significantly reduced the number of catheter-associated urinary tract infections (CAUTIs) on the unit by making sure a patient's catheter use is discussed several times a day, and when one is in place, it is removed as soon as it is no longer needed.

At morning rounds, staff discuss each patient. One of the questions asked if a patient has a catheter, is whether it is still needed. "We push really hard to get that catheter removed," says Suzanne Murphy, RN. "We're always asking, 'Does the patient really need this?' Once the catheter is removed, our patients are less at risk."

In addition, the unit also added a question to each patient's flow sheet, reminding staff several times a day that the catheter should be removed if it is no longer needed. "It's always on the brain," says Paul Currier, MD, medical director of the unit. "It's more likely to be talked about that way."

Catheters are used in the RACU only when absolutely necessary. This means that more patients need to get up to use the restroom, requiring more work for caregivers. However, Maria Winne, RN, RACU nurse director, says, "Our staff embrace change and know that this is what is best for our patients."

For more about the 2015 National Patient Safety Goals, visit *http://intranet.massgeneral.org/excellenceeveryday.* ■

EMBRACING CHANGE: Suzanne Murphy, RN, left, and Tracey Watson, RN

Partners Innovation helps move breakthroughs from bench to bedside

WHILE THE PILLARS of the overall Partners strategy revolve around care redesign and patient affordability, the strategy encompasses all components of the Partners mission, including teaching, research and community health as well as patient care.

In the world of research, Partners is a star – the country's largest non-university-based, not-for-profit private medical research enterprise. In 2014, total research expenditures were more than $1.4 billion, about half of which was funded by NIH and other federal agencies. Research at Partners encompasses bench research, patient-centered research conducted at Partners hospitals, clinical trials of new drugs and devices, health services and epidemiological research.

Every day in research labs across Partners, investigators are working to discover new treatment options and develop new medical devices and technology to improve the lives and outcomes of patients. But getting those discoveries from bench to bedside is complicated.

Enter Partners Innovation, a group of experts in deal making, company creation, IT commercialization, licensing, patenting, translational research, finance, funding and business development. "We work collaboratively with staff to bring their breakthroughs to commercial markets," said Chris Coburn, vice president of Partners Innovation. "Whether they stem from laboratory research, care delivery or management systems, our goal is to deliver the unique attributes developed by Partners innovators into products and services that can

(Continued on page 4)

WORLD MEDICAL INNOVATION FORUM

NEUROSCIENCES | April 27-29, 2015
PARTNERS HEALTHCARE | BOSTON

Partners Innovation hosts international meeting on neuroscience

PARTNERS INNOVATION is sponsoring the inaugural World Medical Innovation Forum in Boston on April 27-29. Each annual forum focuses on one clinical field. In 2015, that's neuroscience. "This year, we'll be exploring approaches to diagnosing and caring for neurologic and psychiatric disorders – such as multiple sclerosis, Alzheimer's disease, Parkinson's disease, depression, schizophrenia, autism, stroke and sleep disorders," said Coburn. "We'll also hear about game-changing diagnostic tools and therapeutic interventions, including genome editing, gene therapy, neuro-stimulation, neuro-regeneration, population management, neuro-imaging and novel biomarkers." The 1,000 expected attendees will include senior executives of large companies, investors, entrepreneurs and officers of venture-backed companies, business-minded clinicians and investigators, government principals and decismakers.

— Partners Innovation

(Continued from page 3)

benefit patients and reduce the cost of care. We bring deep expertise in every phase of discovery, application and commercialization."

Successful industrial enterprises take great science and innovators matched with exceptional business collaborations. An MGH example is an anesthetic drug, etomidate, that was modified to create a safer alternative to propofol. Douglas Raines, MD, of MGH Anesthesia, Critical Care and Pain Medicine, and a team of medicinal chemists at the MGH and Brigham and Women's ultimately linked with an entrepreneur, investors and the Partners Innovation Fund to launch Annovation BioPharma, a start-up company aimed at bringing to market safer and more effective IV anesthetic agents. By 2012, Annovation had acquired product development funding. Earlier this year, the company was bought, and its technology is rapidly advancing toward broad patient care use.

"Working with innovators, thought leaders, entrepreneurs and industry, our job is to enable commercialization of the amazing work done by Partners scientists and investigators," says Coburn. "We run our shop like a business – we prize execution, outcomes and measurable performance."

CELEBRATING IN STYLE: The MGH Chinese Scientists and Staff Association (CSSA) hosted its annual Lunar New Year's Day Party March 6 in the Simches Building to welcome the Year of the Sheep. The celebration featured festive food and lively entertainment by Boston-area artists, dancers and musicians.

PHOTOS COURTESY OF CSSA

— New research app

(Continued from page 1)

GlucoSuccess also will help change the way patients participate in medical research. In addition to making the enrollment process easier, the app will provide patients with insight into their own data. For diabetes patients, this means they will be able to see the effect that physical activity, diet and medications have on their blood glucose levels, which may lead toward positive behavior changes.

"Clinical research can provide long-term insight into disease, which can lead to new treatments," says Shaw. "This app takes the next step of providing insights to patients based on the data that they contribute to the research study, which can inform the decisions they make on a daily basis. It changes the culture of study participation to more of a two-way exchange."

For instance, study participants can view their diet and physical activity patterns on days when their glucose control is optimal, and learn which food items they have eaten are particularly high in carbohydrates or sugar.

MGH's team joined with research groups from academic medical centers across the country to create the first apps using ResearchKit – including apps for breast cancer, Parkinson's disease, cardiovascular health and asthma.

"This project embodies the CATCH mission of discovering new ways of measuring health and disease and placing patients at the center of their care as well as clinical research. A new open-source framework for research app development will lead to a growing ecosystem of apps that tackle different chronic diseases in creative ways," says Shaw.

The app is free and available for download from the iTunes Store.

Announcements available online [illegible] "What's Happening" [illegible]

Submit news tips and story ideas to *MGH Hotline*

EDITOR
[illegible]
617-724-1775

EMAIL
[illegible]

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published [illegible] by the MGH Public Affairs Office

Printed by [illegible]

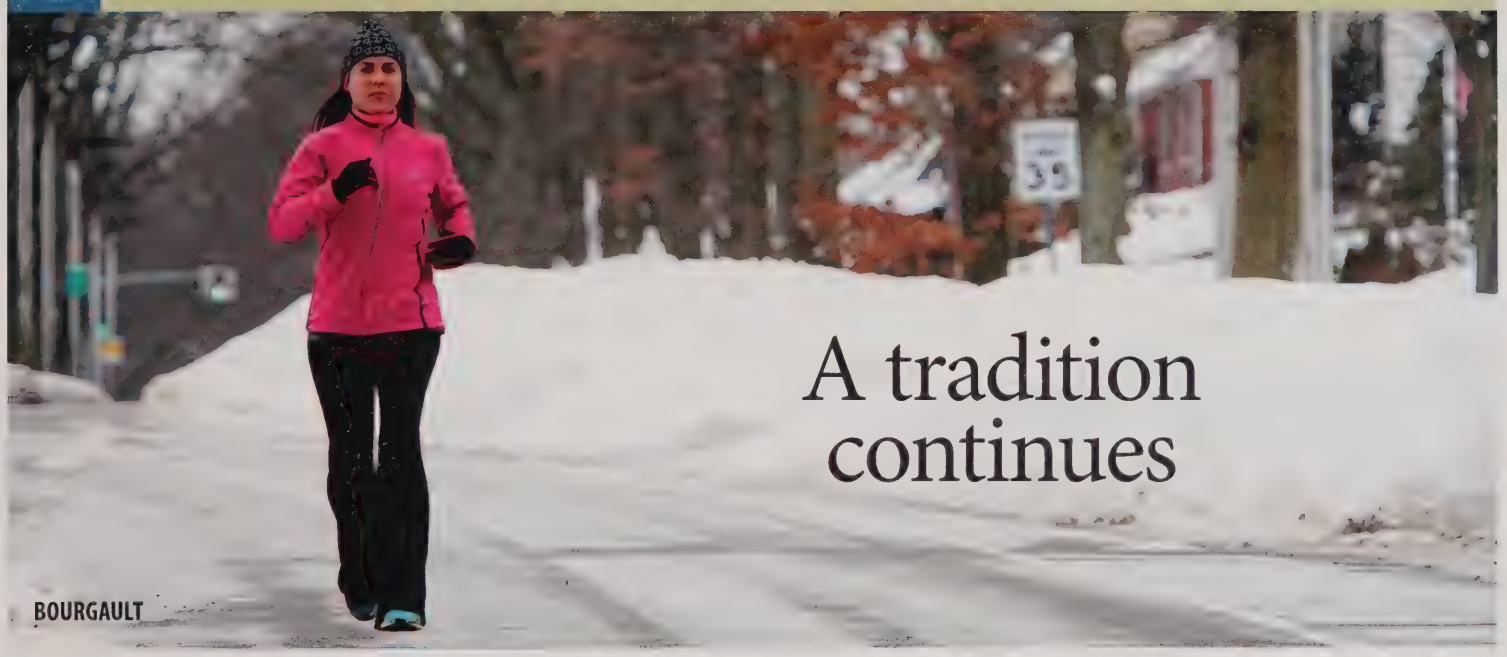
MGH Hotline is printed on recycled paper.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

03.20.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL



BOURGAULT

A tradition continues

ON MARATHON MONDAY, AmyBeth Bourgault will make the trek from Hopkinton to Boston as part of the MGH Emergency Response team – and her mission is personal.

A Brookline native and Boston University graduate, Bourgault and her parents had made it a tradition to watch runners cross the Boston Marathon finish line. The 2013 Boston Marathon was the first time she wasn't able to join them due to work obligations, but they called to tell her what a wonderful day they were having – complete with great weather, a ride on the Swan Boats and a perfect spot in front of Marathon Sports to cheer on the athletes.

Forty minutes later, Bourgault's brother called her in a panic about the bombings.

In the chaos, her parents were taken to separate hospitals. Her father was rushed to the MGH with blistering burns, cuts, bruises and a damaged eardrum. Bourgault's mother's calf was severely injured by one of the bombs. She has undergone numerous surgeries; most recently nerve replacements to ease the constant, excruciating pain she endures. And, physicians are still struggling to save her leg.

"The MGH was at the forefront of the response that day and I want to be part of helping them to build on their disaster preparedness," Bourgault says. "People think of the show 'ER' and have no idea how much more goes into responding to disasters like this."

For the second year, thanks to John Hancock's donated bibs, the MGH will have 40 runners running in support of its Emergency Response Team, raising money to provide critical support for emergency care, disaster relief and disaster preparedness training. This year's marathon will be Bourgault's first in 10 years.

(Continued on page 4)

Hospital ratings on social media appear to reflect quality of care

SOCIAL MEDIA has become an important way for institutions to communicate – both sending messages and receiving feedback – with patients and with the general public. Hospitals and other health care organizations use social media, but there has been little investigation into the accuracy of social media ratings compared with traditionally gathered patient satisfaction and quality data. A new study published online in the *Journal of General Internal Medicine* finds a correlation between how hospitals are rated on Facebook's five-star system and how well they performed on a widely-used measure of quality care.

"We found that hospitals in which patients were less likely to have unplanned readmissions within 30 days after discharge had higher Facebook ratings than were hospitals with higher readmission rates," says lead author McKinley Glover, MD, MHS, a clinical fellow in the MGH Department of Radiology. "Since user-generated social media feedback appears to be reflective of patient outcomes, hospitals and health

(Continued on page 4)

QUALITY REFLECTED: The MGH Facebook page shows the hospital's user rating as of Feb. 4, 2015.

Fairytale Fridays bring magic and joy to pediatric patients

ON HER LAST DAY at MassGeneral Hospital *for* Children (MGH*f*C), a young patient was getting ready to go home when Elsa from Disney's "Frozen" appeared in the doorway.

"Elsa, I've been calling you all week! I just knew you'd come today," the patient exclaimed as she hugged her favorite princess. It is these special moments that Amy Stockton, a Boston-area dance teacher, cherishes most when she visits patients on Ellison 17 and 18 and the Pediatric Intensive Care Unit.

Fairytale Fridays is a volunteer program that Stockton created in collaboration with MGH*f*C's Child Life Department. Every month has a different theme and Stockton dresses as a different princess. "I modify my activities based on what the children want to do that day," says Stockton, who teaches dance and movement to children of all ages, but specializes in teaching children age 6 and younger. "In February, the theme was love, so I dressed up as Cinderella and helped make mailboxes for Valentine's Day. Other months, the children want to dance more or have me read a book to them. It's always different."

PURE MAGIC: Stockton dressed as Cinderella and handed out Valentine's Day cards to patients in February.

Last December, Stockton arrived as the Sugarplum Fairy from Tchaikovsky's "The Nutcracker" and led a dance session in the Ellison 17 playroom. Patients danced and twirled on their tiptoes and made crafts to celebrate the holidays.

Stockton's visits have been nothing short of magical, says Ashley Reardon, CCLS, a child life specialist on Ellison 17 who accompanies Stockton on her visits. "Amy is all about special one-on-one moments," said Reardon. "Fairytale Fridays allow children to be immersed into a magical world, even if it's for a short time. They can escape the realities of a hospital, which can be scary sometimes. It's much more than a costume to our patients. It's real. Amy's warm presence and ability to bring joy and work effectively with children truly makes the difference. It's heartwarming to witness the profound impact she has on the children at MGH*f*C."

Stockton understands that small gestures of kindness have a big impact, especially in a hospital setting. "Both of my parents had cancer and they're doing well in remission now, but I spent a lot of time in hospitals with them," says Stockton. "Healing is much more than physical. It's mental, emotional and spiritual. Because of that, I felt it in my heart to bring dance to MGH*f*C."

EVANS

Courage and kindness can help conquer cancer

MGHER STEVE TEMPLE doesn't know Dorothy Evans. He doesn't know she is being treated for multiple myeloma at the MGH Cancer Center or that she has been receiving blood platelet infusions since the fall of 2013 – infusions she says have greatly helped in her treatment and healing process.

Temple simply knows that rolling up his sleeve and spending 90 minutes sitting back in a comfortable chair at the MGH Blood Donor Center can help to better – and sometimes save – patient lives. That is why the longtime carpenter in the MGH Buildings and Grounds Department has donated platelets 190 times during the past 25 years. "When I found out what platelets were used for, I realized it was for a good cause," he says. "You see the difficulties that cancer patients go through so it all seemed to make sense to me. It's like when you go through a doorway and the person behind you has their arms full of stuff – you hold the door open for them. That's how I feel about donating platelets. It's just being kind. It's so easy."

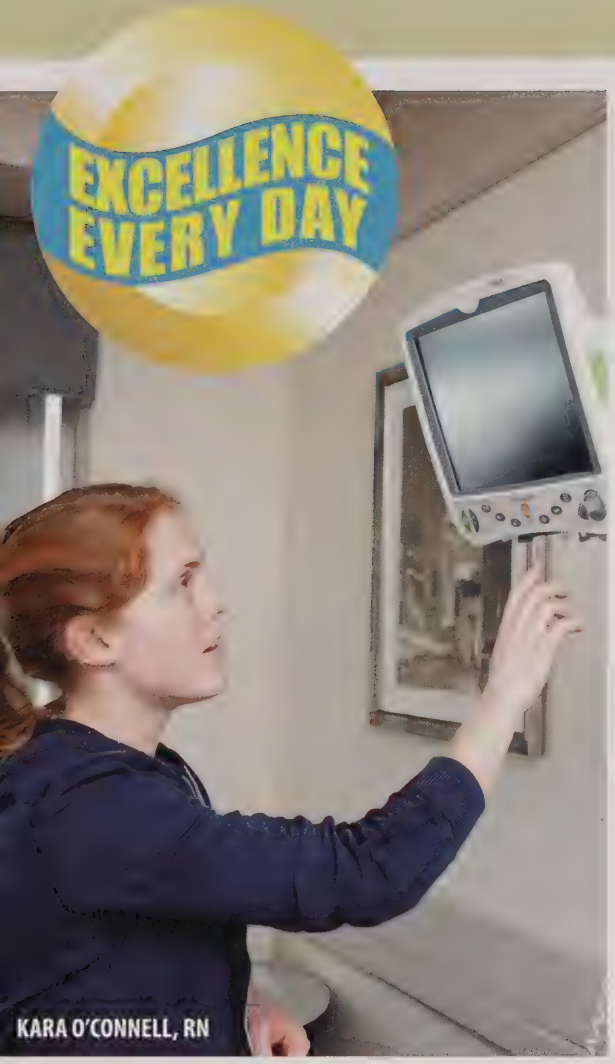
More than 700 people donate blood platelets annually at the center. However, the number of units donated is much less than the number of people who might benefit from infusions.

"I don't think a lot of people know about it," says Mary Kate Callaway, marketing specialist at the Blood Donor Center. "It's much easier than people expect. The process is very similar to a whole blood donation. Platelet apheresis allows for a small amount of whole blood to be withdrawn from a donor and separated into its component parts – red cells, platelets and plasma – through a cell separating machine, with all but the platelets being returned to the donor. The platelets are then tested and made available to patients for transfusion within five days."

For patients like Evans, the kindness of strangers is a welcome addition to their medical journey. She says she hopes each visitor to the MGH Blood Donor Center knows how much their donation means to her and her fellow patients. "Thank you so much for your time and understanding of what people like me need," she says. "I just feel a lot better and stronger after receiving my infusions. The infusions are what saved me. Now my platelet count is way up and I'm healthier because of the treatment."

For more information about the MGH Blood Donor Center, visit the center's Facebook page at *www.facebook.com/MGHBloodDonor* or call 617-726-8177. ■

TEMPLE



Shhh … Phillips House 21 introduces best practices for noise reduction

THE MGH'S WINDOW for a visit from The Joint Commission is now open. When surveyors arrive between now and August, they will be looking at all the ways the MGH exhibits Excellence Every Day. One example is the hospital's success at consistently meeting the 2015 National Patient Safety Goals.

National Patient Safety Goal No. 6 is: "Make improvements to ensure that alarms on medical equipment are heard and responded to on time." The staff of MGH's Phillips House 21 unit has taken a number of steps to eliminate unnecessary noise on the unit. Their efforts have not only created a more healing environment for patients, but allowed staff to be more responsive when an alarm does sound.

Reducing noise has involved a number of initiatives on the unit. First, patients are kept on monitors only when absolutely necessary. "There are several topics that are part of our interdisciplinary rounds each morning, including whether each patient on a monitor still needs to be," says Adele Keeley, RN, nursing director of Phillips 21.

If a patient is not ready to be removed from a monitor in the morning, caregivers will continue to watch their condition throughout the day to ensure that the patient is not on a monitor for longer than needed. "We talk several times per day to determine if the need for a monitor still exists," says Alison Nazzaro, RN, BSN. "If it is not in a patient's safety interest to remove the monitor, we keep the patient on it."

With fewer patients on monitors, there are fewer alarms sounding, allowing those that do sound to be responded to more quickly.

Keeping the unit quieter has also involved eliminating the use of overhead pages and keeping chatter to a minimum at the nurse's station. To communicate with each other while traveling between patient rooms, staff use Voalte phones.

For more about the 2015 National Patient Safety Goals, visit *http://intranet.massgeneral.org/excellenceeveryday/* ■

LGBT Resource Group promotes inclusion

IN RECOGNITION OF National Lesbian, Gay, Bisexual and Transgender (LGBT) Health Awareness Week, the MGH LGBT Employee Resource Group will host a series of events to highlight the group's commitment to providing support, education and outreach to the hospital community. Formed in 2008, the resource group is dedicated to addressing the health care issues that members of the LGBT community face and helps to ensure the hospital provides a safe, welcoming and inclusive environment for all.

"We have a responsibility to make employees and patients alike feel comfortable within these walls. There are times when it is important to know a patient's sexual orientation for medical reasons, but that conversation is rarely an easy one to have," says group chairman Kevin Knoblock, NP, in the Practice Improvement/Service Excellence division. "We are here to help. Our group continues to spearhead efforts to increase awareness and sensitivity to the needs of the many patients and families who visit us, and the employees who work tirelessly to deliver care of the highest quality."

The resource group is in the midst of creating a training program to increase staff and patient comfort during these conversations, teaching tactful approaches to addressing questions about sexual orientation and behaviors. Knoblock says they also are working closely with the Partners eCare group to incorporate a method for collecting this information in a patient's electronic medical record similar to any other piece of medical or social history.

The group will host a series of events open to all staff and patients beginning March 24 *(see full list at right)*.

"The LGBT Employee Resource Group is truly a vital resource within the hospital community," says Mallory Hillard, a clinical research specialist in the Diabetes Research Center, who serves as the group's co-chair. "The committee is comprised of many talented and diverse individuals from various departments within the hospital working cohesively to help foster a community that is both compassionate and inclusive to all."

For more information, visit *http://www.massgeneral.org/lgbt/*.

LGBT Health Week

The LGBT Employee Resource Group will host events throughout next week that are open to the entire MGH community.

March 24, 11 am to 2 pm: Visit the LGBT Health Week table in the White Lobby near Coffee Central. Pick up information about LGBT patient health and find out what initiatives are happening here at the MGH.

March 24, 5:30 to 7:30 pm: View the film "Gen Silent" in the O'Keeffe Auditorium.

March 25, 1 to 2 pm: Adil Haider, MD, MPH, director of the Center of Public Health and Surgery at BWH, will speak in the O'Keeffe Auditorium about his work collecting sexual orientation and gender identity from patients in the Emergency Department.

March 27, 5:30 to 9 pm: Spring Social with guests from LGBT groups from BWH, Boston Children's Hospital, Dana-Farber Cancer Institute, Harvard Medical School and Beth Israel Deaconess Medical Center, at the Wild Rover Boston, located at 61 Chatham St.

All week: Pick up a flyer describing the LGBT group and awareness ribbons at the Employee Access Center and Employee Assistance Program Office, at 175 Cambridge St.

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

— Social media

(Continued from page 1)

care leaders should not underestimate social media's value in developing quality improvement programs."

Co-author of the study, Garry Choy, MD, MBA, an MGH radiologist who is also the MGPO assistant chief medical information officer of advanced technologies, says, "This study shows there is opportunity and significant value in sentiment analysis – the use of social media data to track public opinion – as it pertains to health care."

As the use of social media has grown, consumers' health care decisions may be influenced by information posted to social media sites by patients and others, the authors note. Since few consumers are aware of established sources of information on hospitals' quality of care and outcomes, social media may be a valuable way for institutions both to assess and to share information about patient satisfaction and care quality. Late in 2013, Facebook began providing organizations the option of allowing users to post ratings ranging from one to five stars on their official Facebook pages, and the current study was designed to compare hospitals' 30-day readmission rates with their Facebook ratings.

The investigators analyzed data for 4,800 U.S. hospitals. While more than 80 percent had rates within the expected national average range, 7 percent had significantly lower-than-average readmission rates – a measure that reflects above-average care – and 8 percent had rates that were significantly higher than average. There were no significant differences between the low- and high-readmission hospitals in terms of size, number of admissions, expenses and whether they were nonprofit or for-profit, although major teaching hospitals were more likely to be high-readmission hospitals.

"While we can't say conclusively that social media ratings are fully representative of the actual quality of care, this research adds support to the idea that social media has quantitative value in assessing the areas of patient satisfaction – something we are hoping to study next – and other quality outcomes," says Glover. "Hospitals should be aware that social media ratings may influence patient perceptions of hospitals and potentially their health care choices. Hospitals and other health care organizations should also be aware of the potential message they send by not using social media. Members of the general public should be encouraged to provide accurate feedback on their health care experiences via social media, but should not rely solely on such ratings to make their health care decisions."

MASSACHUSETTS
GENERAL HOSPITAL
The MGH expresses its gratitude to
the active military personnel and veterans
who have served our country and our community.

SPECIAL RECOGNITION: The MGH recently unveiled its honor roll of employee veterans which now hangs on the Employee Recognition Wall across from the MGH General Store. The plaque includes the names of all employees who have identified themselves as veterans in PeopleSoft. The MGH is proud to employ so many active duty and veteran men and women. The honor roll will be updated every year around Veterans Day.

— Marathon

(Continued from page 1)

"My mother was a runner and the unfortunate events of the Boston Marathon bombings took that away from her," Bourgault says. "I run to honor those who cared for the victims, survivors and their families. I run because my mother can't."

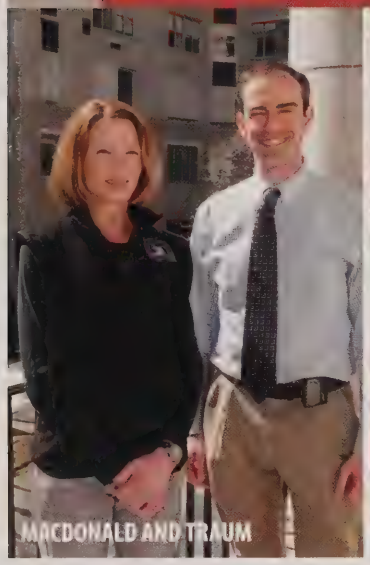
Bourgault says it is too early to anticipate how she will feel once she crosses the finish line, but she knows she will be anticipating seeing her parents cheer her on as the family tradition of attending the Boston Marathon will now continue. "Running the Boston Marathon will bring closure and healing to my family and bring the joy back to an event and tradition we shared for years."

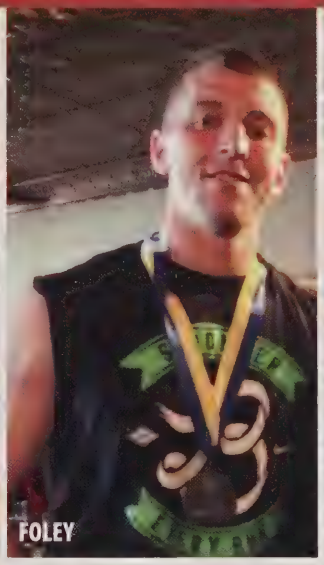
For more information on the Emergency Response Team, visit: *https://www.crowdrise.com/EmergencyResponseTeam/fundraiser/massgeneral.* ■

03.27.15

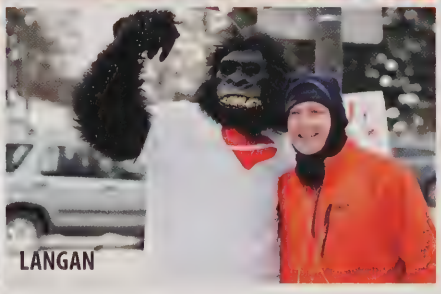
MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL


MACDONALD AND TRAUM


FOLEY

THE FRENI FAMILY


LANGAN

ABBY AND SUSAN D'ANGELO

Marathoners run Miles for Mass General

ON APRIL 20, more than 160 runners will run the Boston Marathon in support of the MGH. Twenty of those runners will participate as part of the Miles for Mass General program, which raises funds for hospital programs that are close to their hearts – including cystic fibrosis, pediatric palliative care, the MGH Cancer Center, the Lurie Center for Autism, and Huntington's disease research at the MassGeneral Institute for Neurodegenerative Disease.

Pediatric Palliative Care

For marathoners like Jeanne MacDonald, MD, of the MGH Neonatal Intensive Care Unit and Avram Traum, MD, of the MassGeneral Hospital *for* Children (MGH*f*C) Pediatric Nephrology Unit, giving back is part of their everyday job. This year, they are taking their role one step further by running the Boston Marathon to raise funds for

(Continued on page 3)

A quarter century of partnership

THE MGH-TIMILTY SCIENCE FAIR PARTNERSHIP has brought middle school students and MGH volunteer mentors together annually for the past 25 years. While hundreds of MGH-Timilty Science Fair projects have been featured in citywide and statewide science fairs, the competition is secondary to the life lessons that are conveyed and the personal bonds formed.

"The goal of the MGH-Timilty Science Fair Partnership is to inspire and engage seventh- and eighth-grade Timilty Middle School students who have a passion for science," says Christy Egun, director of Boston Partnerships for the MGH Center for Community Health Improvement, which oversees the program. "We bring together two individuals from different places and allow them to have a transformational experience by getting to know one another."

Long-time science fair mentor Bill Banchiere, director of MGH Environmental Services, agrees. "I counsel the students not to think of the science fair only as a competition. I tell them, 'This is how you challenge yourself. Look at this experience as a way to make yourself a better person.'"

Banchiere has mentored students for 20 years and recently was honored by the MGH Youth Programs team for his commitment to the science fair

(Continued on page 4)

SAC meeting to focus on research training

AT A TIME WHEN federal cutbacks are making it difficult for even the most experienced researchers to secure essential funding, what is the MGH doing to support young investigators just beginning their careers? The 2015 meeting of the hospital's Scientific Advisory Committee (SAC) will examine the hospital's research training programs for graduate students and for basic and physician scientist fellows. The two-day Celebration of Science begins April 1, with the annual poster session from 11 am to 1:45 pm on the second and third floors of the Richard B. Simches Research Center.

At 2 pm in Simches 3.110, Robert Kingston, PhD, chair of the Executive Committee on Research (ECOR) and chief of Molecular Biology will welcome attendees and announce the 2015 MGH Research Scholars. The winners of the hospital's top research prizes – Shyamala Maheswaran, PhD, MGH Cancer Center, recipient of the Martin Prize for Basic Research; Sekar Kathiresan, MD, Center for Human Genetic Research (CHGR), recipient of the Martin Prize for Clinical Research; and Alexander Soukas, MD, PhD, also of the CHGR, recipient of the Goodman Award – will speak about their investigations. At 4 pm, Constance Cepko, PhD, professor of Genetics and Ophthalmology at Harvard Medical School will give the keynote address "Reflections on Research Training."

The second day of the SAC meeting will begin on April 2 at 9 am in Simches 3.110 with Kingston's annual ECOR report; a report on integration of MGH research into the Partners enterprise by Anne Klibanski, MD, chief of the Neuroendocrine Unit and Partners chief academic officer; and departmental reports from Bruce Walker, MD, director of the Ragon Institute, and Daniel Haber, MD, PhD, director of the MGH Cancer Center. The afternoon session, which begins at 1:10 pm, will feature panel discussions addressing issues affecting graduate students led by Thilo Deckersbach, PhD, head of the Graduate Student Division in the Office for Research Career Development (ORCD); basic scientist fellows, led by Dennis Brown, PhD, director of the ORCD; and physician scientist fellows, led by Andrew Nierenberg, MD, director of Research and Training, MGH Research Institute.

More detailed information – including the full agenda for both days, the Celebration of Science book and the poster session abstract book – is available at *http://ecor.mgh.harvard.edu/Default.aspx?node_id=508*.

BOOK! BOOK! BOOK!: Petrucelli reads to patients

MGH Revere reaches out and reads to pediatric patients

AT REVERE HEALTHCARE CENTER'S pediatric practice, patients are routinely prescribed medications to treat ailments. But on March 20, special guests State Sen. Anthony Petrucelli and Clifford the Big Red Dog joined clinicians to deliver a different kind of prescription aimed at increasing reading time at home.

As part of the national Reach Out and Read initiative, launched in 1989, Petrucelli and Clifford visited the center to read childhood favorites, including "Five Little Monkeys Jumping on the Bed," "Lola at the Library" and "Book! Book! Book!"

"I'm pleased to have this opportunity to visit a Reach Out and Read site and to experience the program firsthand," says Petruccelli. "We know that 43 percent of children in Massachusetts enter school reading below grade level. Exposing infants to books and reading aloud is extremely important in improving early literacy."

> "When we give out books, it's like having a second stethoscope. By watching the parent read, we can observe the interaction and 'listen' to the health of a child's social, emotional and language development."
>
> — Harwood Egan, MD, MGH Revere HealthCare Center program director

In Revere, providers have incorporated books into appointments for patients ages 6 months to 5 years old, using the practice as a tool to begin tactile exploration and development marking for infants. As the child grows, pediatricians are able to assess brain growth through book interaction, comprehension and cognition.

"When we give out books, it's like having a second stethoscope," says Harwood Egan, MD, MGH Revere HealthCare Center program director. "By watching the parent read, we can observe the interaction and 'listen' to the health of a child's social, emotional and language development. Providers discuss these milestones with parents, stressing the importance of reading age-appropriate books aloud to continue development."

Egan says during each appointment children also are given a book to bring home so that by the time they enter kindergarten they have amassed a library of up to 10 books. "With more expansive vocabularies and enhanced language skills entering school, the prescription for more reading is a success," Egan says. "But more importantly, the child has an engaged and informed family unit that understands the importance of early education." ■

ED Observation Unit introduces best practices for medications

THE MGH'S WINDOW for a visit from The Joint Commission is now open. When surveyors arrive sometime between now and August, they will be looking at all the ways the MGH exhibits Excellence Every Day. One example is the hospital's success at consistently meeting the 2015 National Patient Safety Goals.

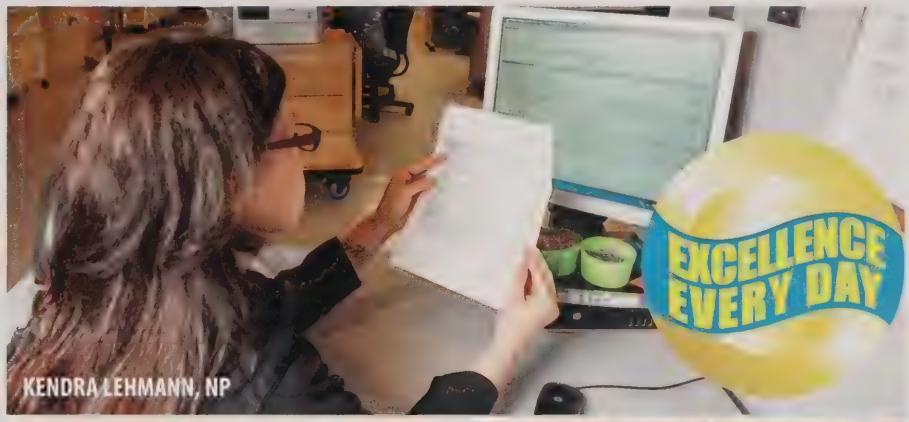
National Patient Safety Goal No. 3 is "Use medicines safely." The staff of the Emergency Department Observation Unit consistently works to ensure that they have an updated medication list for all patients who receive care on the unit.

All patients are asked for a list of their medications upon admission. If the patient does not have this list or is unable to tell staff what medications they are taking, caregivers will seek the information from other sources. These include the patient's medical record, family members, primary care physician or local pharmacy.

Nurses compare the list given to them by the patient with information contained in the patient's medical record. Medications not previously recorded are added to the patient's file, and caregivers check to ensure there will be no adverse drug interactions.

Before patients are discharged from the unit, providers carefully explain to the patient what medications they are taking, what times of day they should be taken and for what duration. The ED Observation Unit is a short-stay unit, so take-home instructions are particularly important for its patients.

For more about the 2015 National Patient Safety Goals, visit *http://intranet.massgeneral.org/excellenceeveryday/* ■



KENDRA LEHMANN, NP

FACTUAL FAIR: Brian Verlizzo, PharmD, MGH Compliance pharmacist, right, staffs one of the tables during the March 10 Ambulatory Joint Commission Educational Fair. Sponsored by the MGH/MGPO Practice Support in collaboration with participating MGH departments, the event allowed outpatient practice staff members to speak with subject matter experts regarding ways to ensure compliance.

—Marathon

(Continued from page 1)

MGH*f*C's Pediatric Palliative Care Service. Both have seen firsthand how the staff serves as an anchor to families and aim to raise funds for the services at the MGH. "This is a small and valuable team that provides big care for seriously ill children and their families," McDonald says. "They are a crucial support in times of crisis."

Cystic Fibrosis

For the 15th year, the MGH Cystic Fibrosis team will run to fight cystic fibrosis and support the cystic fibrosis program at MGH*f*C. Twelve runners will tackle the course this year, including first-time runner, Patrick Langan, who is running for a friend's daughter who has cystic fibrosis. "I watched the Boston Marathon for years and always dreamed about running it. I am thrilled to run my first race for a cause that is dear to my heart." The team raised $100,000 last year and aims to break that record in 2015.

Cancer Center

The MGH Cancer Center is among the leading cancer care providers in the United States; it is comprised of more than 37 treatment programs within 29 fully-integrated, multidisciplinary disease centers and offers a vast array of support and educational services. As beneficiaries of that care, Peter Farrington and Patrick Foley will run this year's marathon raising funds for the Cancer Center. "This will be marathon number 10 for me," says Foley. "This past spring, my sister-in-law was diagnosed with cancer. I was on the fence about running again this year because all of these races were starting to take their toll. Seeing the treatment she received and the program at the MGH, I knew I wanted to do my part to help out." Farrington will run in honor of his late mother and recently diagnosed sister-in-law, who both received treatments at the MGH. "They're working every day to make treatments less painful for families and ultimately trying to find a cure – that is who I will be running for."

MIND Huntington's Disease Research

Abby D'Angelo is running the 2015 Boston Marathon to raise funds for Huntington's disease research at the MassGeneral Institute for Neurodegenerative Disease (MIND). Although there is currently no cure for the hereditary disease, she and her family remain hopeful for her mother Susan, who was recently diagnosed. "I've visited MIND and have seen the amazing work that is being done to find treatments for Huntington's and other related diseases," D'Angelo says. "I am so happy I can help them fund more research with the money I'm raising by running the marathon."

Lurie Center for Autism

The three runners raising funds for the Lurie Center for Autism have more than a shoestring connection – they are family. Mike Freni will run this year's Boston marathon with his two brothers, E.J. and Rob to support the Lurie Center where Mike's 9-year-old son, Joey, is a patient. "This is Team Joey's eighth year running the Boston Marathon for the Lurie Center and we hope to do it for many years to come," says Mike. The Lurie Center leverages the MGH's unique capability to offer comprehensive care alongside advanced research and is focused on meeting the many needs of individuals with autism from early childhood through adulthood. ■

Announcements available online
To read this week's "What's Happening" items, visit www.massgeneral.org/news/hotline

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find MGH News on the web at www.massgeneral.org/news or by scanning the QR code above.

Best in show

TOP HONORS: Congratulations to Cynthia Hydes, left, a seventh-grade student at Timilty Middle School who took first place in the Boston Public Schools Citywide/MA Region VI Science Fair Middle School Division and also won the Raytheon Top Middle School Project prize. Cynthia collaborated with MGH mentor Lori Rizzo, RN, BSN, MBA, a staff specialist in Perioperative Services. "We looked at cell phone use and response time to a red-to-green light change. Cynthia found the average response time for drivers using their cell phones was significantly longer, indicating some level of distraction," Rizzo says. "To get this data, we had to monitor an intersection located near the MGH for two hours in the snow and frigid cold."

Last year Rizzo's mentee also took top honors in the fair's Citywide Middle School Division. "Mentoring middle school students successfully involves finding that balance between making the experience enjoyable and yet instilling a sense of accountability," she says. "My mentees learn if they put in the effort and strive for excellence, they can achieve a lot – and have fun while doing it."

— *Timilty Partnership*

(Continued from page 1)

partnership. Over two decades, the projects have been as varied as the students. "In my first year, the student I mentored expressed an interest in archeology. We developed a project examining neighbors' trash to try to find out who lives in each home – babies, children and adults – based on the things they were throwing into the trash. The student, of course, had their permission." Banchiere says other memorable science fair projects included generating electricity from fruit, controlling fruit flies through various liquids and testing termite communication through chemical reactions.

Allan Dolinski, MGH Environmental Services manager, has volunteered as a science fair mentor for 13 years, most recently as a substitute mentor, filling in if a student's mentor is unable to attend a meeting. "I volunteer because when someone asks me to do something, that means they really need someone. I never say no. If no one volunteers, the program suffers," he says.

Dolinski's most memorable project was growing plants from seeds. "It was a total disaster. It was winter, and the student brought the plants from school to here and back. It just didn't work. I discourage plant-growing projects."

Karlotta Fitch, who recently retired from her role as administrator for the Alzheimer's Disease Center, is another long time science fair mentor. "I have always loved science and working with children. At the MGH, I had a small lab with space and equipment and time to mentor. I love the 'gee, wow' of discovery and understanding that is happening before my eyes," she says. Fitch says the first student she mentored is now working as a nurse at the MGH. Now that she has retired, Fitch continues to volunteer at the Timilty Middle School and helps sixth graders with their science fair projects.

"Mentors like Bill, Allan and Karlotta are the lifeblood of our Youth Programs. Without them, we're nothing," says Egan.

MGH staff interested in volunteering for next year's science fair project can contact Tracey Benner at *tbenner1@mgh.harvard.edu*. Volunteers also are needed year-round for other MGH Youth Programs initiatives, such as Job Shadow Day, Summer Jobs and guest speakers. For more information, contact Margo McGovern at *mjmcgovern@partners.org* ■

SHAMROCK SLIME: St. Patrick's Day at MassGeneral Hospital *for* Children would not have been complete without a green surprise. On March 17, Child Life Specialists Caroline Armington and Heather Peach were covered in gooey, green slime in the Ellison 17 playroom during Slime Day. The event was hosted by the Hole in the Wall Gang Camp, a nonprofit organization dedicated to providing "a different kind of healing" to pediatric patients and their families in recognition of Child Life Month.

04.03.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

MGHer turns summer job into career

STAFF SUPPORT: Aman, center, with his colleagues, from left, MGH Ambassadors Soeun Say, Alveu Amaury, Eric Franklin and Edner Amazan.

IN THE SUMMER OF 2007, Tarik Aman started working as an MGH valet attendant in what he thought was going to be seasonal employment. Seven years later, he now is the audit manager for the MGH Parking and Commuter Services Department. He also is one of nearly 450 employees who have benefited from the hospital's Support Service Employee Grant program, which provides an opportunity for eligible staff to receive up to $1,500 toward the cost of continuing education or skill-building programs.

"When I first started, someone in Police and Security noted my good interaction with Cancer Center patients. Within one month, a colleague informed me about an opening on the evening shift, which would allow me to attend school in the morning. Valet was supposed to be a summer job. Thankfully it put me on a career path with MGH Police, Security and Outside Services," Aman says.

A year after coming to the MGH, Aman applied for and was awarded a $1,200 Support Service Employee Grant, and he enrolled in the College of Science and Mathematics at the University of

(Continued on page 3)

Back on track

WHILE TRAINING FOR THE 2015 BOSTON MARATHON as a member of the MGH Emergency Response team, Mark Annunziata knows not to be too hard on himself. He views each mile – each step rather – as a gift.

On the night of Dec. 7, 2011, Annunziata hit the streets of Boston's North End for a run. He was training for his first marathon, the 2012 Cape Cod Marathon. The training run started out as one of his best. When Annuziata got to a crosswalk, he started running in place until the signal changed. "As I started to cross, a cab driver clipped me," he says. "I was knocked out. I woke up on the sidewalk. The music from my headphones was still blaring in my ears. I took a deep breath in, but I couldn't get one out."

Annunziata was rushed by ambulance to the MGH, where he was treated for a severely lacerated liver, broken ribs and other injuries. "The

(Continued on page 4)

A GIFT OF LIFE: On April 20, Annunziata will have the support of his wife, [illegible], their four children, [illegible], Andrew, Ella, Sammy and [illegible].

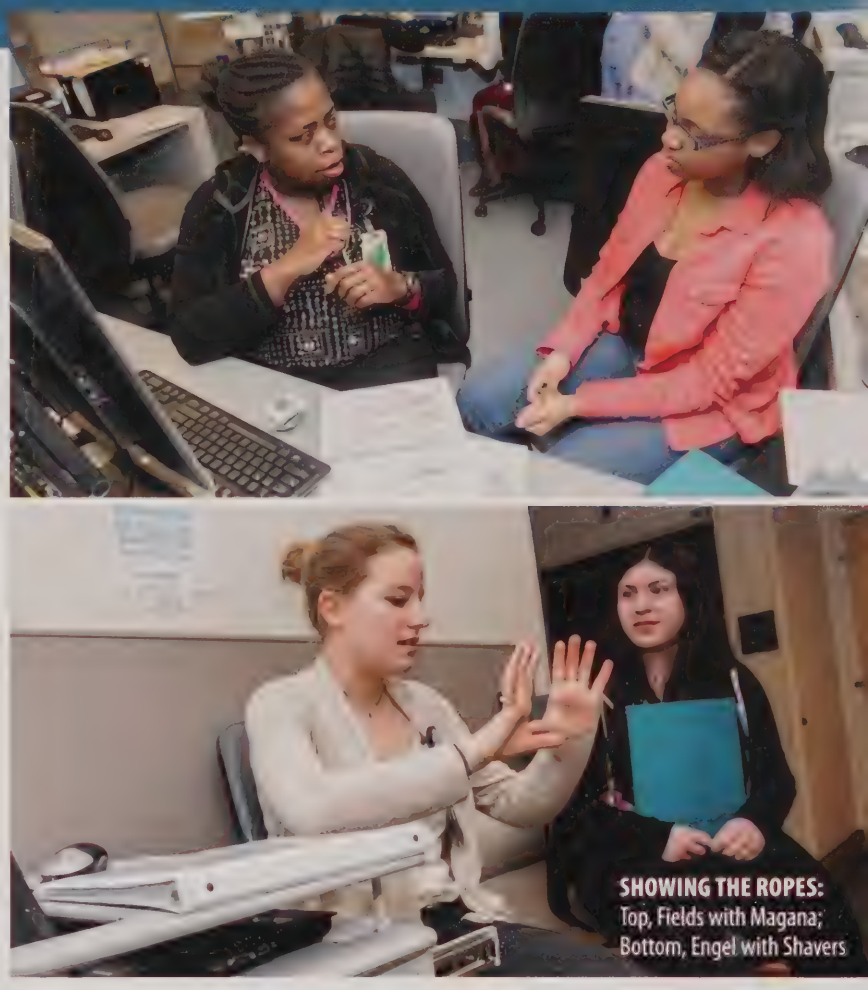
Students get glimpse into hospital careers

THE MGH Center for Community Health Improvement brought 104 Boston high school students together with 47 hosts across 26 departments for the hospital's annual Job Shadow Days, held on March 13 and 20.

The event provides students with a glimpse into various hospital careers, helps them gain awareness of the skills needed for these jobs and helps them to identify potential career options.

The MGH Emergency Department has participated in Job Shadow Day for five years, and this year it hosted four students. Todd Fahey, senior training and implementation manager, says they work to make the day a rich and thoughtful experience. "Our goal is to expose students to many facets of health care – including careers in nursing, as physician assistants and as administrators," he says. "We show them there is a job and a path for everyone. I think that our staff also take away something similar to what we give. I think we all walk away feeling good that the students learned something new."

During the event, Arday Shavers, a student from the Community Academy of Science and Health, shadowed Rebecca Engel, treatment area coordinator in the Emergency Department, who described how patients who arrive at the hospital via ambulance are triaged, and then sent to different areas depending on the severity of their condition. And Monique Fields, RN, discussed with student Jennifer Magana, from East Boston High School, the math and science requirements needed to become a registered nurse. ■



SHOWING THE ROPES: Top, Fields with Magana; Bottom, Engel with Shavers

Global health experts outline lessons to be learned from Ebola epidemic

IN THE YEAR since the World Health Organization (WHO) was first notified of an outbreak of what proved to be Ebola virus disease in the west African country of Guinea, more than 24,000 cases have been reported and over 10,000 individuals have died – primarily in Guinea, Liberia and Sierra Leone. Moreover, countless non-Ebola deaths have occurred as a result of the closing of health systems in those countries, and an international aid effort has invested billions of dollars in control efforts.

In a paper published in the open-access journal *PLOS Medicine*, experts in global health from the MGH Center for Global Health and the O'Neill Institute for National and Global Health Law at Georgetown University, write that while the international response to the epidemic included unprecedented measures that appeared to be gaining control of the outbreak by the end of 2014, the past year has also revealed critical weaknesses in the global public health system.

"Had (the WHO and the United Nations) responded earlier and more effectively after the first signs of an uncharacteristic outbreak, it is likely that the number of lives lost, the impact on health infrastructure and the magnitude of the eventual response could have been drastically diminished," the authors write. "It is incumbent upon the global public health community to identify gaps revealed during the early stages of the epidemic so that we improve our collective ability to detect and respond early to the inevitable next emergency disease."

Specific recommendations made by lead author Mark Siedner, MD, MPH, and Hilarie Cranmer, MD, MPH, MGH Center for Global Health; and Lawrence Gostin, JD, and John Kraemer, JD, MPH, O'Neill Institute, include the following:

- Greater attention to the specific capabilities of health systems in affected localities when determining the presence of a public health emergency.
- Adjustment of WHO criteria for public health emergencies of international concern to give greater weight to a country's need for international assistance, less to the potential for spread across borders, and the flexibility to tailor recommendations to the particular situation.
- Greater involvement of local authorities, organizations, public health and community leaders to develop culturally appropriate measures and maintain public trust.
- Providing sufficient resources – financial and personnel – to mount an adequate response, possibly through the establishment of a permanent global emergency fund and corps of health workers trained to respond to international crises.
- Supporting the development of health systems in sub-Saharan Africa and other low-income countries capable of providing both the routine services required to maintain a population's health and an adequate initial response to public health emergencies.

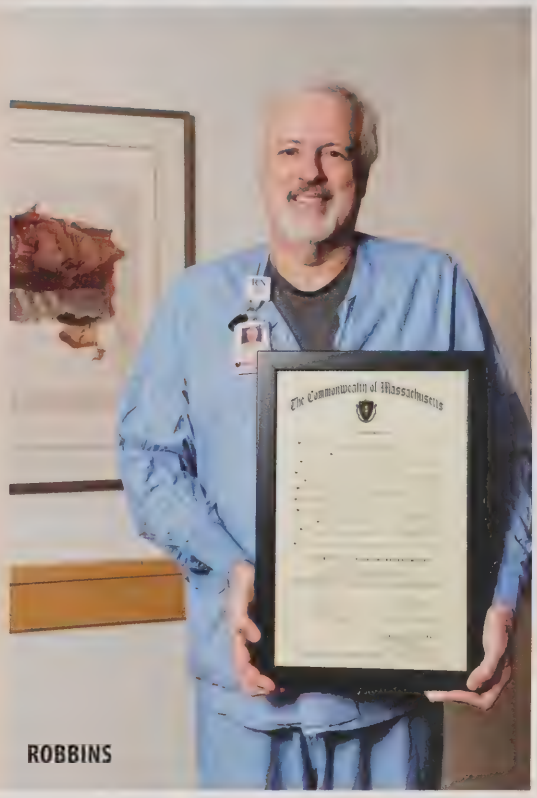
In their conclusion, the authors note that the delayed response to the early stages of the epidemic illustrates, "not only the danger posed by disease outbreaks in states with weak health systems but also their widespread impact in an increasingly globalized world. ...The power of global health law and global health institutions will remain seriously unrealized and deeply compromised if the Ebola epidemic does not spur fundamental reform."

Supporting the fight against colorectal cancer

WHEN CHRISTOPHER ROBBINS, RN, CGRN, opened the envelope holding the proclamation declaring March as Colorectal Awareness Month in the state of Massachusetts, he couldn't stop smiling. "It was just so wonderful," says Robbins, of the MGH Digestive Disease Health Care Center. "Seeing Gov. Charlie Baker and Lt. Gov. Karyn Polito's signatures on it – I had shivers."

Robbins submitted a request to Baker's office earlier this year, as part of a national campaign to have every state in the nation boast an official proclamation. Robbins says the project was the brainchild of the Colon Cancer Alliance – the leading national patient advocacy organization dedicated to increasing screening rates and survivorship. All but six states successfully petitioned to have March deemed as Colorectal Cancer Awareness Month.

Robbins plans to have the framed document hung in the MGH Endoscopy Unit on Blake 4. "It is really important for patients who come here to see that we are doing a lot to bring attention and awareness to this issue," he says. "Colorectal cancer is preventable. We want to make sure our patients are educated about prevention and treatment."



ROBBINS

— *Career*

(Continued from page 1)

Massachusetts Boston. In addition to the grant program, he also took advantage of the tuition assistance program. In 2012, Aman graduated with a degree in biology, about the same time an auditor position opened in Parking and Commuter Services. With a bachelor's degree in hand, Aman pursued the opportunity and was hired. Two years later he was promoted to audit manager. Although the new position is outside his field of study, Aman believes his education prepared him well for the role, which involves a lot of data analysis.

"I believe it's great we have the chance to get help from the MGH and it reflects in my career." Aman says he continues to grow and develop his skills by taking MGH Leadership Academy courses and hopes one day to pursue a master's degree. He also encourages his staff to take advantage of the opportunities available to enhance their education and skills.

Applications for the 2015 MGH Support Service Employee Grant are being accepted through 5 pm on May 13. The grant is available to eligible non-exempt employees in administrative, clinical, service or technical support roles. For more information about MGH Training and Workforce Development grants, the tuition assistance program, upcoming financial aid workshops, or the annual education fair, email *MGHTraining@partners.org.* ■

Partners in Excellence Awards ceremony

ALL MEMBERS of the MGH community are invited to attend the annual Partners in Excellence (PIE) Awards Ceremony April 23 at 3 pm in the Bulfinch Tents. The program recognizes exceptional Partners employees and teams in one of the following five categories: quality treatment and service, leadership and innovation, teamwork, operational efficiency and outstanding community contributions. This marks the PIE Awards' 17th year.

Partners received a record number of PIE nominations and 2,033 MGHers will be recognized during this month's ceremony. This number represents 327 individual awards, 72 MGH team awards and five Partners HealthCare network team awards. The celebration will include a photo opportunity with senior leadership for individual and team PIE recipients and refreshments.

For more information, call 617-724-9743 or email *partnersinexcellence@partners.org.*

Striving for Excellence Every Day

THE MGH'S WINDOW for a visit from The Joint Commission is now open. When surveyors arrive sometime between now and July, they will be looking at all the ways the MGH exhibits Excellence Every Day. The Excellence Every Day Communications Subcommittee has created two humorous videos, reminding staff that proper hand hygiene and proper medication management are always top priorities at the MGH. Staff are encouraged to view these videos – and learn more about Excellence Every Day as well as the 2015 National Patient Safety Goals – by visiting *http://intranet.massgeneral.org/excellenceeveryday/.* ■

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Pre-Passover preparation prerequisite

ON APRIL 1, THE MGH CHAPLAINCY hosted its annual mechirat chametz ceremony to help Jewish members of the hospital community observe Passover, commemorating the emancipation of the ancient Hebrews from enslavement in ancient Egypt. Passover begins April 3 and ends April 11.

Rabbi Ben Lanckton says during this time any form of chametz – or leavened food product – is forbidden for Jews to eat or even to own, in memory of the haste in which the Jews left Egypt leaving no time for their bread to rise. "Jews avoid owning chametz by eating it or giving it away to the poor," Lanckton says. "Often they own too much of a food to make it practical to do either. So, in the spirit of cooperation, the rabbi of a Jewish community meets with a non-Jewish counterpart for mechirat chametz, or the sale of the chametz, for the duration of Passover."

BEARING WITNESS: Lanckton, center, with MGH staff Edwin Andrews, Bessie Manley and Barbara Schreur

All staff, patients and their families were invited to the ceremony in the MGH Chapel. "This ceremony is rich in history and symbolism," Lanckton says. "At this time of year, when Jews and Christians are each celebrating their own spring renewal festivals, this ceremony highlights the opportunities for shared celebration." ■

— *Marathon*

(Continued from page 1)

doctors and nurses were so calm and professional," he says. "I'm sure they had seen injuries like mine hundreds of times. But they put me at ease." His caregivers decided that instead of operating, they would let his liver heal on its own. Doctors also pinpointed a buildup of fluids in his lungs, a condition that required an aggressive two-week treatment.

Now fully recovered, Annunziata will run the 2015 Boston Marathon with 39 other runners as part of the MGH Emergency Response team to help raise funds for the hospital's emergency response programs. He says without the care he received at the MGH, that 2011 training run could have been his last. "I don't like to talk about that night, but those people will always be near and dear to my heart."

For more information about this year's MGH Emergency Response team, visit *www.crowdrise.com/emergencyresponseteam*

Run for MGH T-shirts available

THE 2015 BOSTON MARATHON is quickly approaching, and there are many ways staff can show their support for the hundreds of runners who are running in support of the hospital. One way is to purchase an official MGH Marathon Team T-shirt for $26.20, available online at *www.runformgh.org/tshirt* or in the MGH General Store. Supporters are encouraged to take photos wearing the shirt and post them with the hashtag *#run4mgh*. For more information about the marathon program, visit *giving.massgeneral.org/boston-marathon/*.

04.10.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Plastic Surgery mission transforms lives of Colombian children

IN FEBRUARY, William (Jay) G. Austen Jr., MD, chief of the MGH Division of Plastic and Reconstructive Surgery and Division of Burn Surgery, and a plastic surgery team from MassGeneral Hospital *for* Children (MGH*f*C) traveled to Colombia for their annual Cartagena Surgical Mission. Now in their 16th year, Austen and his team help children born with congenital deformities – such as cleft lips and palates – or injuries, leg burns and other traumas. Colombian families trek for days and countless miles, often through rural jungle terrain, to see the plastic surgery team from MGH*f*C.

Hearing of such withering journeys is itself a moving

experience for the medical volunteers. "We take care of patients in need who have no other options," says Austen. "Without our help, these children face a lifetime of exclusion simply because of the way they look or their inability to communicate."

Launched in the late 1980s, the Cartagena Surgical Mission is staffed by MGH*f*C surgeons, residents and nurses as well as medical personnel from other hospitals around the country. Once a year, a team of 20 medical professionals

(Continued on page 4)

RED CARPET ROLLOUT: From left, Pauly, with Information Desk staff Thomas Burns, Josefina Marroquin, Stacy Phillip, Nancy Magoon, and Ives Erickson

Honoring excellence

ABOUT 300 ATTENDEES turned out for the second annual MGH Service Excellence Awards ceremony, honoring 120 leaders and teams for their extraordinary achievements in improving the patient experience at the hospital. Sponsored by the MGH Service Excellence Department, the event was held April 1 at the Beacon Hill Boston Wyndham Hotel.

Staff in inpatient units, outpatient practices and other hospital departments were recognized for individual, leader and team awards in two categories – nominations from colleagues or based on excellent patient-centered care and service scores.

"It's our privilege to help our patients and families through difficult circumstances, but there is always room to improve our efforts," said Rick Evans, senior director and chief experience officer of Service Excellence, who served as master of ceremonies. "We are dedicated to making their experience better. Today we are honored to recognize the incredible strides you have taken and remarkable efforts you have introduced over the course of the past year. Your commitment to excellence is appreciated throughout the institution."

To present the awards, Evans was joined by Greg Pauly, chief operating officer of the MGPO; Jeanette Ives Erickson, RN, DNP, senior vice president for Patient Care and chief nurse; and Alexa Kimball, MD, medical director of the MGPO.

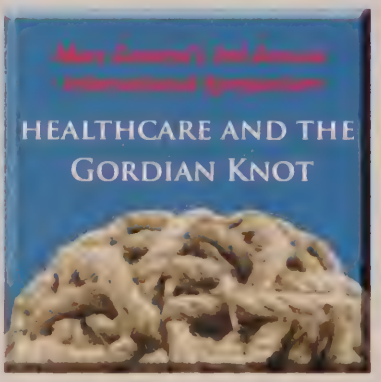
"You're doing exceptional work and taking exceptional care of our patients. We're thrilled to have this opportunity to say, 'Thank you,'" said Ives Erickson. ■

Patient Care Services to host third annual international symposium

PATIENT CARE SERVICES and the MGH Institute for Patient Care will host their third annual international symposium entitled, "Healthcare and the Gordian Knot: Preparing to lead through unprecedented change, challenge and complexity." The two-day event takes place June 15 and 16 at the Joseph B. Martin Conference Center at Harvard Medical School.

"Experts from across the country will share their expertise on education, politics, finance, technology and health care reform," says Jeanette Ives Erickson, RN, DNP, senior vice president for Patient Care and chief nurse, who will speak at the symposium. "This event will explore the ever-changing health care landscape and how we can prepare for the future. Changes in care delivery, quality, technology, innovation, reimbursement, policy and the socioeconomics of health care all will be discussed."

MGH President Peter L. Slavin, MD, will serve as one of the event's keynote speakers, discussing what the future of health care will look like, while fellow keynote speaker Susan Grant, RN, chief nurse executive and chief patient services officer



at Emory HealthCare, will present a timely topic for many at the MGH and across the nation, called "From Ebola to eCare: The Evolution of Leadership." Another popular topic will be addressed by Emily Barey, RN, director of Nursing Informatics at Epic, who will discuss "Leveraging Technology and Innovations in Practice."

"Unquestionably the landscape of health care is changing," says Mike Sullivan, PT, DPT, director of Physical Therapy Services. "It is affecting our patient experiences and our health care staff. We need to continue to build effective leaders who can help guide their colleagues through interprofessional collaboration and can manage multiple competing priorities. We will increasingly require clinical and operational leaders who can draw from their clinical experience to drive change in a way that advances the principals of patient-centered and evidenced-based care. This symposium is a helpful step along that journey."

The symposium is open to all staff as well as the general public. There is a cost to attend. For more information, visit *www.mghpcs.org/ipc/Gordianknot.*

Showcasing Excellence Every Day

DURING THE JOINT COMMISSION SURVEY, a team of 10 inspectors will review processes of care and visit more than 40 patient care units, ambulatory practices and procedural locations in addition to MGH lab sites.

Every MGH employee should expect to interact with a surveyor and be able to talk about his or her role in Excellence Every Day, which represents the MGH's commitment to providing the highest quality, safest care that meets or exceeds all standards set by the hospital and external organizations.

As always, employees should also remember to:

- Wear your hospital ID in a visible location at all times;
- Be positive, welcoming and professional when surveyors visit your area;
- Be prepared to discuss your direct or indirect role in supporting safe patient care and in operational improvement within your department;
- Consult your supervisor or manager if you do not know the answer to a surveyor's question;
- Understand your role in emergency preparedness and responding to any type of emergency;
- Ensure that there is no clutter in hallways, elevator lobbies, connecting corridors and storage rooms and that any food or drink is in an appropriate location; and
- Call Environmental Services (726-2445) or Buildings and Grounds (726-2422) to report housekeeping or maintenance issues.

For more information visit, *http://intranet.massgeneral.org/excellenceeveryday.* ■

'Don't forget hand hygiene'

THE MGH'S WINDOW for a visit from The Joint Commission is now open. When surveyors arrive sometime between now and July, they will be looking at all the ways the MGH exhibits Excellence Every Day. One example is the hospital's success at consistently meeting the 2015 National Patient Safety Goals.

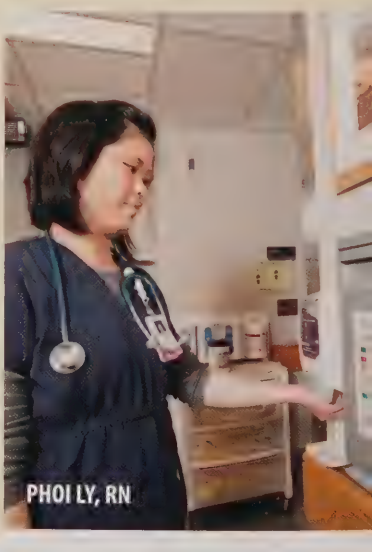
National Patient Safety Goal No. 7 is "Prevent infection and use the hand hygiene guidelines from the Centers for Disease Control and Prevention or the World Health Organization." The staff of Ellison 12 – a medical unit – has significantly increased its hand hygiene rates by keeping proper hand hygiene at the top of mind for all who provide care.

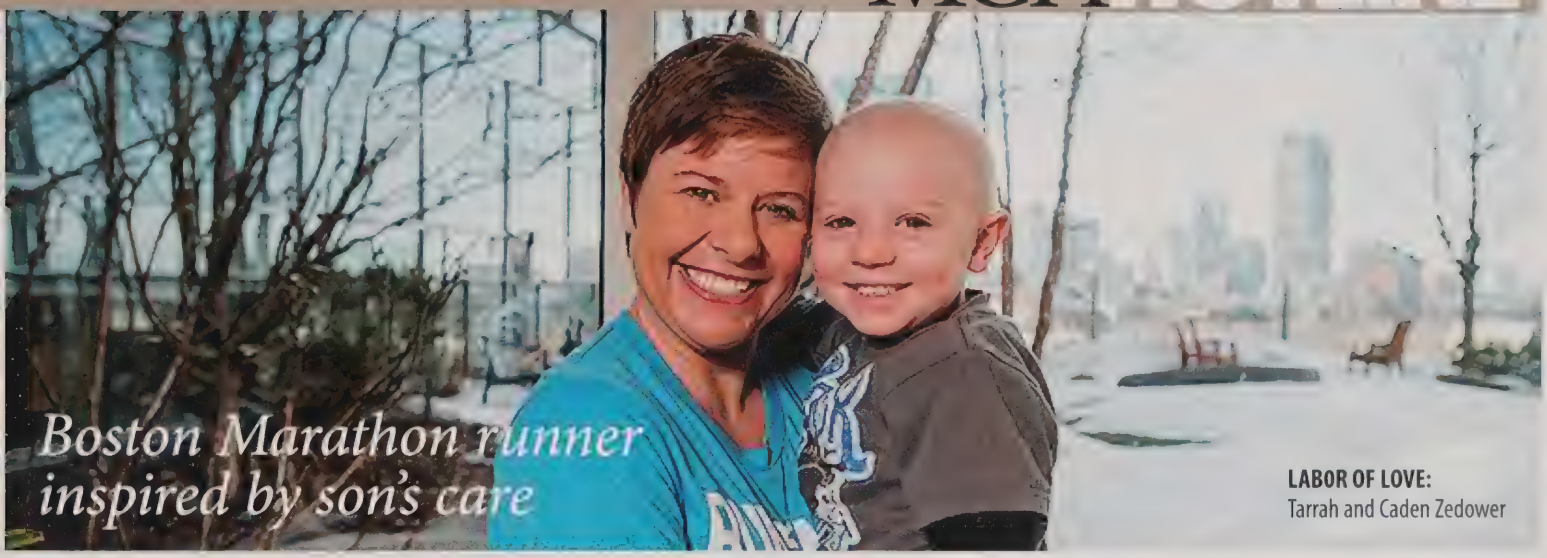
Proper hand hygiene has become part of Ellison 12's fabric. "Don't forget hand hygiene" is a phrase heard often on the unit, and it is not uncommon for staff to receive an email or text message reminding them of the importance of cleaning hands properly. Department leaders say staff are not afraid to speak up if they see a colleague not properly practicing hand hygiene.

"We don't have a punitive environment," says Melissa Joseph, RN, nursing director. "Even when someone has to remind a colleague, it is never meant in a punitive way. It's always meant to improve."

Every Ellison 12 staff member knows the unit's hand hygiene rates. Quarterly data is shared not only with unit managers, but also with each staff member. Charts and graphs illustrating the unit's progress are posted on a board in the corridor. "Numbers really motivate us," says Venice Scott, RN.

For more information about the 2015 National Patient Safety Goals, visit *http://intranet.massgeneral.org/excellenceeveryday/.*


PHOI LY, RN



Boston Marathon runner inspired by son's care

LABOR OF LOVE:
Tarrah and Caden Zedower

TARRAH ZEDOWER never dreamed she would run the Boston Marathon. This year, however, she's joined the MGH's pediatric cancer team "Fighting Kid's Cancer ... One Step at a Time," a group that she first learned of last summer when her now 3-year-old son, Caden, was diagnosed with acute lymphoblastic leukemia, a cancer of the bone marrow and blood.

"When I read statistics about how underfunded pediatric cancer research is, I knew I needed to run," Zedower says. "This place has been our safe haven. It's been intimate, family-oriented, personalized and healing."

Zedower says Caden has even blossomed into an enthusiastic musician thanks to MassGeneral Hospital *for* Children's music therapy program, designed to put anxious young patients at ease during treatments. "We had no idea it would become a talent of his," Zedower says. "The first day in the clinic, [music therapist] Lorrie Kubicek came in with a guitar. I thought, 'He loves music. This will be the best distraction ever.' And the music has kept him wanting to go back. Think about it: He's a 3-year-old boy who knows he has to have a needle stuck into the port in his chest every single visit, and he still looks forward to going. It's been amazing. They've unleashed this little musician."

At each treatment, Caden plays his pick of maracas, a ukulele, bongos or an electric drum pad and belts out songs from the Beatles to Simon & Garfunkel. Zedower says Caden's connection to the clinic has nothing to do with medicine, treatments or even cancer but rather with playing music with new friends. "He is really teaching our whole family how to live through this, and he is thriving. He is my hero, he is my inspiration," Zedower says. "All of these kids fighting alongside Caden need people like us to stand up for them and do something for them."

As he improves, Caden will probably only see his bandmates at the clinic once a month. Now, when he's rocking out at home, Zedower says that he "looks and acts just like any other 3-year-old. Thanks to the MGH, he's doing amazingly well."

To support Zedower and other dedicated runners raising funds for the MGH's pediatric cancer team, visit *https://giving.massgeneral.org/boston-marathon/pediatric-cancer-team/*. ■

A record-breaking night for the Aspire Gala

ON APRIL 2, MassGeneral Hospital *for* Children celebrated its 15th annual Aspire Spring Gala at the Four Seasons Boston. The event raises funds for the program, which is designed to equip children, teens and adults on the autism spectrum with the knowledge, skills and inspiration to achieve successful and fulfilling lives. More than 800 guests enjoyed the celebration and raised a record-breaking $2.1 million, enabling Aspire to keep its programs affordable for families, grow and improve its existing programs and expand its popular young adult internship program.

Five Aspire program participants emceed the event and shared with the audience personal success stories from their Aspire internships. Guests at the event – including Aerosmith bassist Tom Hamilton, retired Red Sox pitcher Curt Schilling, Liberty Mutual Insurance CEO David Long and Peter L. Slavin, MD, MGH president – were treated to dinner and a live auction, which featured a trip to the eighth annual David Ortiz Celebrity Golf Classic in the Dominican Republic and VIP seats to an upcoming Taylor Swift concert.

Scott McLeod, PhD, executive director of Aspire, thanked guests for their contributions and support. "We rely on this gala to help us fund the insurance gap as well as to cover financial aid for participants in need," he said. "We are so very grateful to our partners, donors and to our event committee. At Aspire we have an approach that works. We have designed programs that serve young people with autism spectrum disorder as they grow. We understand that success at any stage – and every stage – can be transformational."

In addition to the event, Boston's Zakim Bridge was lit blue during the evening to bring attention to National Autism Awareness Month and the work of the Aspire program. ■

SUPPORT SYSTEM:
McLeod, center, with Aspire staff and interns

04.10.15

MGH HOTLINE

Announcements available online
To read this week's "What's Happening" items, visit [illegible]

Submit news tips and story ideas to *MGH Hotline*

EDITOR
[illegible]

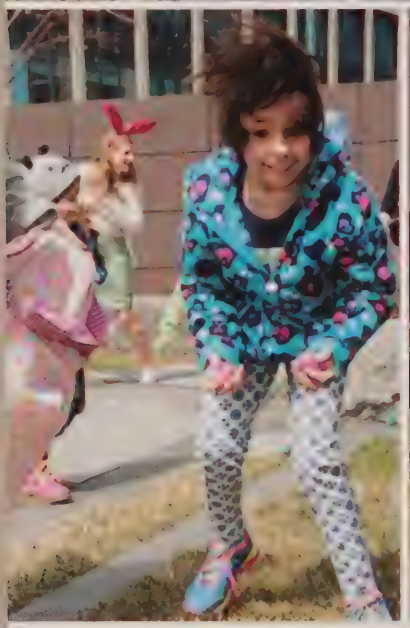
EMAIL
[illegible]

MAIL
[illegible]

MGH Hotline is published weekly by the MGH Public Affairs Office

Printed by [illegible]

MGH Hotline is printed on recycled paper.



HOPPING ALONG: Patients and their families were treated to a special visit by the Spring Bunny on April 2 during the 10th annual MassGeneral Hospital *for* Children's Spring Egg Hunt. Warm sunshine drenched the Howard Ulfelder, MD, Healing Garden in the Yawkey Center as, clockwise from top right, Jayda Couldren, 3, Jisele Samulonis, 5, and Zuehailey Torres, 9, fill their pillow bags with multicolored plastic eggs and goodies. Afterward, the children decorated cupcakes in the Pediatric Hematology-Oncology Outpatient Clinic.

— Cartagena Surgical Mission

(Continued from page 1)

travels the more than 2,200 miles to the charity hospital in Cartagena. Neither patient nor parent pays for the care received.

Members of the team donate their time and services. Throughout the year, they also call upon charitable donors in the United States to help cover the cost of related medical supplies, some of which help the Cartagena hospital care for patients long after the volunteers leave. Last fall, during its annual Storybook Ball, MGH*f*C auctioned a chance to join the mission and see the team's work firsthand.

During this year's Feb. 4 to 14 trip, team members examined some 150 children and operated on 60 patients, while also following-up with past plastic surgery patients. Austen says some children have problems that are so profound they require several plastic surgery operations spread over a period of years.

"Each year we see children from 8 weeks old to 18 years old, and the ability of our team to give these kids a chance in life is why medical missions like our annual trip to Cartagena are so important," Austen says.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

04.17.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

READY TO RU...
MGH employe... in the... runners

Motivated by the MGH

AMONG THE THOUSANDS of Boston Marathon runners on April 20, more than 150 runners will be sporting teal blue T-shirts worn by MGH teams. Forty-three of those runners will be MGH employees who have committed to run 26.2 miles to support the hospital where they already make an impact supporting patients and their families.

Thanks to the longstanding partnership with John Hancock, the MGH Marathon Program continues to grow from its inception in 1998, raising more than $10 million through its marathon programs: Fighting Kids' Cancer ... One Step at a Time, Miles for Mass General and the MGH Emergency Response Marathon Team. Runners on the three teams raise funds for pediatric cancer, emergency response and other MGH programs, including Pediatric Palliative Care, the MGH Cancer Center, the Lurie Center, MIND Huntington's Disease Research and the cystic fibrosis program at Mass General Hospital *for* Children.

A special gathering to recognize employee runners was held April 17 under the Bulfinch Tent. ■

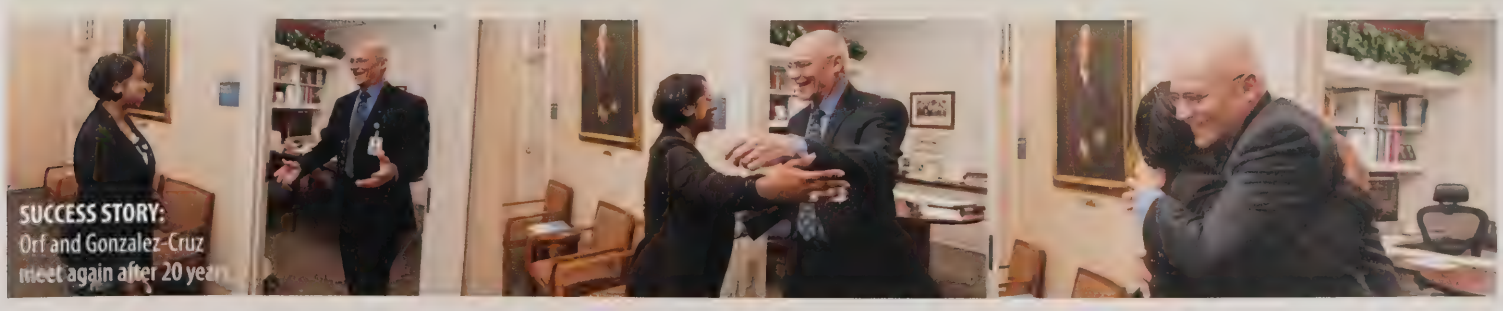
Reunion reconnects MGH mentor and mentee

OF ALL THE HONORS AND RECOGNITIONS given to Harry Orf, PhD, senior vice president of Research, the award of which he is most proud is the 1997 American Hero Award from the U.S. Department of Education and the city of Boston. The small plaque – presented to him by then-Boston Mayor Thomas M. Menino and James P. Timilty Middle School Principal Roger Harris – hangs in his office, a constant reminder of his dedication to science education.

"We wanted to give students a practical appreciation for science and the knowledge of what the world is made of and how it affects their lives every day," Orf says of the founding of the MGH-Timilty Science Fair Partnership, which he helped to launch in 1990.

Two decades after Orf was paired with then-eighth-grader Becky Gonzalez-Cruz, the duo happily reunited on April 10. They each remember with great fondness their experience developing Gonzalez-Cruz's science fair question and working together at the MGH every other week for 14 weeks to complete the project.

(Continued on page 4)



SUCCESS STORY:
Orf and Gonzalez-Cruz meet again after 20 years

IN MEMORIAM

Kenneth L. Minaker, MD

KENNETH L. MINAKER, MD, a longtime member of the MGH community, died April 11. Minaker, who served as chief of the Geriatric Medicine Unit in the Department of Medicine, was known as a visionary leader who pioneered new approaches in the care of older adults. The MGH program he created has become internationally renowned and has served as a global model for geriatric programs.

"Our loss of Ken creates a void," said Britain Nicholson, MD, chief medical officer. "He will be remembered for having made a difference. He brought the discipline of Geriatrics to the MGH, and it thrives. His fellows have gone on to flourish not only here but around the country, and his patients know that they have been cared for and cared for well."

"When I think about my career, the most gratifying aspect is caring for my patients. Second to that is the pride in building new training programs for fellows, residents and junior faculty. Third is the research findings that got me started here."

— Kenneth L. Minaker, MD, in 2013

Minaker received his medical degree from the University of Toronto and was in the first graduating class of Geriatric Fellows at the Harvard University Division on Aging. At the MGH, Minaker helped to establish the Geriatric Medicine Unit and during his career he was dedicated to expanding clinical services to older adults and providing community outreach within the MGH Senior Health Practice. In 2009, he launched the Geriatric Fellowship Program, which offers advanced specialty training to attract physicians to the field of geriatric medicine.

Internationally renowned, Minaker received numerous awards, published more than 130 articles and contributed to 15 books. He was named a fellow of the Royal College of Physicians and Surgeons of Canada, received the Nascher Manning Award from the American Geriatrics Society – given for distinguished lifelong achievement in clinical geriatrics – and was recognized with the Greenwall Foundation Award from the American Federation for Aging Research. In 2013, Minaker was named the inaugural incumbent of the MGH Chair in Geriatric Medicine, which will be renamed the Kenneth L. Minaker Chair in Geriatric Medicine in his honor. This acknowledgement is one of the highest honors that can be bestowed on a physician and was the first chair in Primary Care Medicine established at the MGH.

"Ken was a strong advocate of the hospital's philanthropic program," says Jim Thompson, vice president for Development. "He readily understood that private sector support was essential for building upon the mission of the MGH. Many of his patients became generous benefactors supporting education, research and capital projects. It was remarkable to see the resounding support develop once it was announced that there would be an MGH chair that carried his name in perpetuity."

Minaker is survived by his wife, Colleen, and children, Jason, Rebecca, Kyle and Tara. A service is scheduled from noon to 2 pm on April 18 at the Newton Cemetery on Walnut Street in Newton.

Making college affordable, accessible and achievable

PARTNERS HEALTHCARE has a longstanding commitment to career development with two purposes: sustaining a well-prepared workforce and creating economic opportunity for employees.

That commitment was bolstered two years ago with the establishment of a partnership between Partners and College for America (CfA) of Southern New Hampshire University. CfA offers competency-based, self-paced, online college degree programs, a number of which focus on health care.

"We know there are significant barriers for our employees who want to pursue a degree," says MJ Ryan, director of Workforce Development at Partners. "Among them are the time commitment to attend classes and the financial commitment to pay for them. We were impressed with the CfA model, which responds not only to the needs of employers for skill development in specific work-related areas but also to the needs of employees for flexible scheduling and affordable tuition."

Because CfA is a competency-based program, there are no credit hours or courses. Students learn through projects that are targeted toward specific skills needed by Partners and other employers – such as communication, critical thinking, teamwork and collaboration, quantitative skills, digital fluency and information literacy, personal effectiveness, and ethics and social responsibility. "Employees who have completed one of the programs have mentioned that the skills they gained have been valuable and useful in both their work and their personal lives," says Ryan.

One of those employees is Tina Byrnes, an office assistant in the Bulfinch Medical Group who has worked at the MGH for six years. In early 2014, Byrnes was selected to enroll in the CfA program because of her commitment to online learning and working to further her education and career path. She recently completed her associate's degree in general arts through the program and received her diploma in March.

"Without the financial support from the MGH and Partners HealthCare, I never would have been able to afford the CfA program," said Byrnes, who now plans to continue in the program and work toward her bachelor's degree in health care management. "I have been given an opportunity of a lifetime, and I am so grateful that the organization chose to invest in me. I now have the confidence and competence to grow both personally and

Music for a cause

PLAYING ALONG: Kubicek shares a song with a patient Ani Ayanyan.

HAUSMAN

AREA MUSICIAN Ibby Hausman got her first guitar and started writing music when she was 13, the same year her mother, Kim, was diagnosed with breast cancer. Kim says the music was a way for Ibby to cope with her diagnosis and the seemingly endless chemotherapy and radiation treatments she underwent.

"When I was diagnosed I got all this information on how to help the kids deal with the cancer," Kim says. "This is the most incredible way my daughter found to deal with my diagnosis."

Ibby would go with her mother to her chemotherapy sessions, and after noticing volunteers playing music outside of the treatment area, she discovered that the MGH has a Music Therapy Program.

For her sweet 16 birthday party in December, Ibby asked her guests to donate money to a local charity in lieu of presents. She knew immediately to which charity the donations would go.

"It took less than 10 minutes to decide that the MGH Music Therapy Program was where I wanted to donate the money," Ibby says. "After a stellar birthday, a total of $2,525 was raised."

Ibby and her father personally delivered the check to Lorrie Kubicek, the program's director, just before the new year. The donation will benefit the MGH Instrument Lending Library, which allows the hospital to share instruments with music therapy patients during extended hospitalizations and also allows patients to take them home and "test drive" them in between chemotherapy treatments.

"For patients who are learning how to play an instrument as a part of their music therapy sessions, this enables them to really see if the instrument is a good fit in their lives before investing their own money in it," Kubicek says. "For patients who can't afford their own instrument, this fund also allows us to help them with this purchase. We are very thankful to Ibby for her generous donation and support of our Music Therapy Program."

As part of community service, Ibby will be volunteering with the MGH Music Therapy Program this summer. Additionally, she will donate all proceeds from her new record, "Never Slowing Down," to the MGH Music Therapy Program. ■

professionally. I also am setting an excellent example for my children."

CfA offers two bachelor's degrees – communications and health care management – and two associate degrees – general studies with a concentration in business and general studies for nonclinical health care. The program is open to all Partners employees.

Ryan says there are many advantages to the CfA program, including:

Affordability – The program costs $2,500 annually, some or all of which can be covered through tuition reimbursement. Its "all you can learn" approach encourages students to stay on track and enables them to capitalize on what they already know to accelerate the time to completion of their degree.

Flexibility – Students progress by completing online projects when it is convenient for them rather than attending traditional lectures and courses.

Relevance – Partners has worked with CfA to ensure that the skills and competencies students gain will be relevant to their daily work.

Coaching – Students have access to coaches within Partners and through CfA to counsel them on careers and enable their success.

Credibility – Credits and degrees earned through the CfA are conferred by Southern New Hampshire University, a not-for-profit, fully accredited university.

Ryan says, "The CfA program is one of many options for Partners employees who wish to continue their education. Partners and its member institutions work at various levels with a number of colleges and universities, but CfA is a distinct model that is well suited to many of our employees."

Preparatory program

enrollment opportunity for the CfA degree programs will be in the fall. In the meantime, employees who are considering becoming CfA students have some time to take a needed preparatory step: a web-based Online College Preparation Program (OCPP).

"OCPP offers our employees an orientation to online learning," says Ryan. "And it supports them, through career coaching and peer learning, to develop the confidence and competence to succeed in online college classes."

OCPP is a gateway program – prospective CfA students must complete OCPP or have successfully completed a previous college course online. To date, more than 800 Partners employees have enrolled in the OCPP program.

Employees can enroll in OCPP at any time. The program normally takes five to seven weeks to complete. For more information or to register for OCPP, visit *www.partners.org/OCPP* and click on registration form.

04.17.15

MGH HOTLINE

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

HOME OPENER: MGH Food and Nutrition Services celebrated opening day at Fenway Park Monday by serving ballpark favorites in the Eat Street Café's recently reopened panini station area. Baseball-themed decorations were on display, and customers could choose from a variety of dishes named in honor of the Red Sox – including "The John Farrell," "Monster Dogs" and the "Big Papi Melt." Here Franklin Garces serves up another tasty treat of the day – free bags of popcorn.

— *Reunion*

(Continued from page 1)

At the time, Gonzalez-Cruz says, she had read an article about silicone leaking from breast implants. Concerned about a relative who had diabetes and took insulin injections with silicone-tipped syringes, she was inspired to research the health effects of silicone and to try to answer the question: "Would patients taking daily insulin injections using a syringe with silicone as a lubricant ever get enough silicone into their system to cause a health issue?"

"I believe we used an atomic absorption spectrometer from the Gillette Company that could measure silicone concentrations and could actually calculate the concentrations from syringe injections," Orf recalls.

Gonzalez-Cruz adds, "I think we found, even over a lifetime, that not enough silicone would be absorbed to be a problem."

After middle school, Gonzalez-Cruz continued on a path to a science career. She studied at the John D. O'Bryant School of Math and Science, and as part of the MGH Summer Jobs Program, she worked as a receptionist at the Women's Health Associates for two years and in the Department of Orthopædics for an additional summer. She then took pre-med courses at Gordon College in Wenham. After switching majors to Youth Ministry and Biblical Studies, to follow her interest in faith-based counseling of juvenile offenders, Gonzalez-Cruz returned to Gordon-Cromwell Theological Seminary for a master's degree in counseling. Today, Gonzalez-Cruz is a mental health clinician with Commonwealth Mental Health and Wellness Center and remains interested in pursuing population-based research in mental health and possibly a doctoral degree.

Last week's reunion ended with Gonzalez-Cruz and Orf recalling Timilty Principal Harris, and his commitment to making a difference for his students. Together they recited one of the school's pledges from 1995: "I believe in you. You believe in me. We believe in all people. I love you. You love me. We love all people. I pledge to do my best for you. You pledge to do your best for me. We pledge to do our best for all people."

Partners in Excellence Awards ceremony

ALL MEMBERS of the MGH community are invited to attend the 17th annual MGH Partners in Excellence (PIE) Awards Ceremony April 23 at 3 pm in the Bulfinch Tents. The program recognizes exceptional Partners employees and teams in one of the following five categories: quality treatment and service, leadership and innovation, teamwork, operational efficiency and outstanding community contribution.

Partners received a record number of PIE nominations, and 2,033 MGHers will be recognized during this month's ceremony. This number represents 327 individual awards, 72 MGH team awards and five Partners HealthCare network team awards. The celebration will include a photo opportunity with senior leadership for individual and team PIE recipients and refreshments. For more information, call 617-724-9743 or email *partnersinexcellence@partners.org*. ■

04.24.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

MAKING A DIFFERENCE: Rain, winds and chilly weather did not stop runners from the MGH Marathon teams on Marathon Monday, April 20. A total of 165 runners braved the elements in support of the hospital, raising funds for pediatric cancer, emergency response and other MGH programs – including Pediatric Palliative Care, the MGH Cancer Center, the Lurie Center, MIND Huntington's disease Research and the Cystic Fibrosis program at MassGeneral Hospital *for* Children. Runners were celebrated by family, friends, patients and staff at Mile Marker 20 along the marathon route. To date, the 2015 teams have raised more than $1.4 million. A slideshow of photos from the event can be viewed on *www.youtube.com/user/MassGeneralHospital.*

MGH Cancer Center receives second Stand Up to Cancer Dream Team award

STAND UP TO CANCER (SU2C) and the American Cancer Society (ACS) announced the formation of a new Dream Team to tackle the problem of lung cancer during the annual meeting of the American Association of Cancer Research (AACR) held April 20 in Philadelphia. ACS estimates that 221,000 people in the United States will be diagnosed with lung and bronchial cancer in 2015, and 158,040 will die from it, making lung cancer the leading cause of cancer deaths in both men and women.

The new Dream Team will be led by Jeffrey Engelman, MD, PhD, director of the MGH Center for Thoracic Cancers. The award provides $20 million to researchers, clinicians and a patient advocate to study the use of targeted therapy and

(Continued on page 4)

TACKLING CANCER: From left, Otis W. Brawley, MD, ACS chief medical officer; Jedd D. Wolchok, MD, co-leader of SU2C-ACS Lung Cancer Dream Team; Sung Poblete, SU2C president and CEO; Engelman; and William H. Chambers, MD, vice-chairperson of SU2C-ACS Joint Scientific Advisory Committee

SAC meeting focuses on challenges facing research trainees

THE 68TH ANNUAL MEETING of the MGH Scientific Advisory Council (SAC) began with the Celebration of Science on April 1. The annual poster session featured 188 posters, 12 of which were named posters of distinction through a new process involving presentations by 32 chosen finalists. The afternoon's scientific session began with the announcement of eight new MGH research scholars (see below) and talks by the winners of the hospital's top research awards:

Shyamala Maheswaran, PhD, of the MGH Cancer Center, received the Joseph Martin Prize for Basic Research for her August 28 *Cell* paper finding that circulating tumor cells (CTCs) carried through the bloodstream in clusters are more likely to spawn metastases than are single CTCs.

Sekar Kathiresan, MD, Center for Human Genetic Research, received the Martin Prize for Clinical Research for two *New England Journal of Medicine* papers – published on June 19 and Nov. 13 – describing naturally occurring gene variants that decrease the risk of cardiovascular disease.

Alexander A. Soukas, MD, PhD, of the Center for Human Genetic Research, received the Howard Goodman award for his investigation of "thrifty" metabolic pathways that enable organisms to survive conditions of starvation, pathways that can lead to obesity in situations where food is plentiful.

The keynote address, by new SAC member Constance Cepko, PhD, of Harvard Medical School (HMS), was preceded by a video in which MGH graduate students, basic science postdoctoral fellows and physician/scientist fellows discussed the challenges of training at the hospital, often citing the need for better ways to connect with trainees in other programs and departments. Cepko – who founded the PhD program in Biological and Biomedical Sciences at HMS, as well as the Leder Program, which helps PhD students focus on translational medicine – discussed issues facing today's trainees, such as difficulty starting careers after finishing their fellowships. She noted that a program at the HMS Division of Medical Sciences, largely led by students themselves, could serve as a model for students and postdocs at the MGH.

The April 2 SAC meeting began with the annual Executive Committee on Research (ECOR) report by Robert Kingston, PhD, chief of Molecular Biology and outgoing ECOR chair, and a report by Anne Klibanski, MD, chief of the MGH Endocrine Unit and Partners chief academic officer, on Partnerswide initiatives and resources. Bruce Walker, MD, director of the Ragon Institute, reviewed how MGH leadership in HIV research and the support of major donors and foundations led to the founding of pioneering research programs in South Africa and the 2009 establishment of the Ragon Institute, devoted to finding immune system-based therapies and vaccines for HIV/AIDS and other disorders. Daniel Haber, MD, PhD, director of the MGH Cancer Center, described the latest MGH advances in personalized cancer therapy and promising new approaches being pursued by investigators.

The afternoon session featured three panel discussions addressing specific needs of different trainee groups. The graduate student panel – led by Thilo Deckersbach, PhD, head of the Graduate Student Division in the Office for Research Career Development (ORCD) – described the division's accomplishments since its founding in 2012 and its current goals, including addressing the special need of international students. The PhD fellows panel – led by Dennis Brown, PhD, director of the ORCD – reviewed the office's evolution over the past 10 years and current areas of focus, such as improved mentoring and identifying potential new career paths. Andrew Nierenberg, MD, director of Research and Training, MGH Research Institute, led the physician scientist panel, which discussed how the traditional pattern of National Institutes of Health research grants has changed and the need to explore new sources of support for young physician scientists.

"As usual, we received valuable advice from SAC members, including support for a dedicated postdoctoral training office and excellent suggestions on tough topics, such as the need for permanent staff scientist positions for basic researchers who do not have clinical skills," says Kingston. "Members also engaged in a lively discussion concerning the new Research Institute and how that structure might integrate with training, research and funding opportunities." ■

2015 MGH Research Scholars

THE MGH RESEARCH SCHOLARS PROGRAM was founded in 2011 to support promising young investigators pursuing innovative approaches to challenges in medical science. Funded by philanthropy, the program provides five years of unrestricted support and now includes 36 scholars. This year's group, chosen from 100 applicants, was announced at the April 1 Celebration of Science.

Harald Ott, MD, Center for Regenerative Medicine, Department of Surgery

Mikael Pittet, PhD, Center for Systems Biology, Department of Radiology

Mark Poznansky, MD, PhD, Vaccine & Immunotherapy Center, Department of Medicine

Sridhar Ramaswamy, MD, MGH Cancer Center, Department of Medicine

Michael Talkowski, PhD, Center for Human Genetic Research, Department of Neurology

Elsie Taveras, MD, MPH, General Academic Pediatrics, MassGeneral Hospital *for* Children

Lawrence Wald, PhD, Martinos Center for Bioimaging, Department of Radiology

Rochelle Walensky, MD, MPH, Division of Infectious Disease, Department of Medicine

SCIENTIFIC SESSION: The SAC poster session highlighted 188 studies by MGH investigators.

MGH researcher named to Time magazine's top 100 list

TANZI

WHEN TIME MAGAZINE recently released "The 100 Most Influential People in the World" list for 2015, a familiar name was spotted among the array of pioneers, artists, leaders, icons and titans.

Rudolph Tanzi, PhD, director of the MGH Genetics and Aging Research Unit, was featured for pioneering research in Alzheimer's and for his significant contributions to understanding Alzheimer's genetics.

"It was a nice surprise to hear I was on the list," Tanzi says. "I am hoping that we can now use this honor to raise more awareness, and more importantly, support for our Alzheimer's research programs at the MGH."

In the magazine, Tanzi's profile was written by Maria Shriver – executive producer of the films "Still Alice," "The Alzheimer's Project," and the founder of the Wipe Out Alzheimer's Challenge – who calls Tanzi's latest discovery "a truly remarkable feat."

Tanzi and fellow neuroscientist, Doo Yeon Kim, PhD, of the Genetics and Aging Research Unit, developed what is being dubbed "Alzheimer's in a dish." The researchers were able to produce human brain cells in a petri dish that develop the biomarkers of Alzheimer's disease.

"Tanzi stands out as one of the few scientists who has committed his career to finding a cure for Alzheimer's, and last year he brought us one step closer," Shriver wrote. "This makes it possible for scientists to better study which of the countless drugs out there might actually slow or wipe out this mind-blowing disease."

Tanzi's fellow honorees on the *Time* list include scientists Emmanuelle Charpentier and Jennifer Doudna, actor Bradley Cooper, professional ballerina Misty Copeland, among many others.

The Joint Commission completes MGH assessment

THE SURVEY TEAM from The Joint Commission – the independent nonprofit organization that accredits and certifies more than 19,000 health care institutions and programs in the United States – completed its five-day assessment of the MGH's hospital and laboratory sites on April 17. The 10-member survey team spent an equivalent of 51 days here, examining patient care areas, facilities and laboratory sites.

> "This was a very successful survey. We always hope for zero findings, but findings are learning opportunities. They help us pinpoint areas where we can do better in our goal of practicing Excellence Every Day."
>
> — John Belknap

"This was a very successful survey," says John Belknap, chief compliance officer. "We always hope for zero findings, but findings are learning opportunities. They help us pinpoint areas where we can do better in our goal of practicing Excellence Every Day."

Among the areas that surveyors said could use some improvement were:

- **Documentation in the medical record:** Provider signature, date and time should be indicated in every entry into patient records.
- **Infection control:** Surveyors recommended improvements in high-level disinfection processes.
- **Environment of Care and Life Safety:** The Life Safety surveyor was exceptionally impressed with the cleanliness of MGH facilities, but a small number of recommendations were made for improvements.

Despite the findings, surveyors were generous with their praise of the MGH – the staff, facilities and the care provided to the hospital's patients. "Phenomenal," "superb," and "best in the nation" were just a sampling of the feedback heard from surveyors. More than once, they called an MGH process a "best practice" and suggested the hospital publish its way of doing things in the commission's library of online resources for hospitals.

During the week, surveyors also examined MGH laboratories. In the lab survey, the following areas were recommended for improvement:

- Documentation oversights in proficiency testing areas
- Improvements to the monitoring of the critical value process
- A small number of findings in quality system assessment requirements

"We are incredibly positive about this survey. During the exit conference, the lead surveyor said that despite some negative findings, all indications were that the patients at the MGH were receiving excellent care," says Belknap. "This is something we believe 100 percent and we're delighted The Joint Commission agrees." ■

04.24.15

MGH HOTLINE

Advocating for increased awareness of men's health

MANY SAY THAT good clinicians wear their hearts on their sleeves when caring for patients. The MGH Department of Urology and Orthopedics staff on Ellison 6, however, took a different approach last November by encouraging their male counterparts to sport mustaches as part of the national Movember Foundation's initiative to increase focus on men's health issues. Led by Holly Milotte, RN, 15 employees established the "Sweet Stache Ellison 6" team as a show of support for the patients they treat daily and for their loved ones battling prostate cancer.

The Sweet Stache-ers challenged colleagues, family members and friends to change the face of men's health by growing facial hair and donating funds, raised through T-shirt sales, to research. The team sparked conversations in their personal and professional networks about prostate, bladder and testicular cancers – issues that may be difficult for many men to discuss. "The idea struck me as October passed – which is dedicated to breast cancer awareness – where is the focus on men's health awareness? I started this drive because men's health issues really don't seem to be a topic of conversation," says Milotte.

Participation and commitment were easy to solicit from Milotte's colleagues, who have seen their own families' struggles with cancer. Meaghan Lydon, RN, MSN, the team's top fundraiser, was steadfast in her efforts. "This was so important to me. I did it in memory of John Lydon, my husband's father, who succumbed to colon cancer in 2012 and for my dad who is continuing to fight prostate cancer. I wanted to do something to further help the cause."

Jill Pedro, MSN, RN, ACNS-BC, ONC, clinical nurse specialist, also had a special motivation to increase education. "In 2010, my best friend and wonderful husband was diagnosed with prostate cancer. The good news is that he is now cancer-free because of the early detection and extraordinary care that he received at the MGH."

These newly-minted men's health advocates also have continued to further educate patients, families and their own relatives. Brochures and flyers are now featured prominently, allowing patients and their families to leave the MGH with insightful information during times of high stress. "At the end of the campaign, we were able to smile and enjoy the fact that we had the ability to make a difference and donate $2,395 to the Movember Foundation. Patients often stop by our display and walk away with a smile, so that's enough for me," says Milotte. ■

SHOWING SUPPORT: Members of the "Sweet Stache Ellison

— *Stand Up to Cancer*

(continued from page 1)

immunotherapy to eradicate tumors driven by the KRAS mutation, which is found in about 20 to 25 percent of lung cancer patients.

"We plan to use these new combination therapies to improve quality of life for our patients and have a dramatic impact on outcomes," says Engelman. "I'm proud to be working with such an impressive group of scientists from some of the leading institutions around the world."

Engelman will be supported at the MGH by fellow investigators Nir Hacohen, PhD; Beow Yong Yeap, ScD; Cyril Benes, PhD; and Justin Gainor, MD. The other Dream Team members come from Memorial Sloan Kettering Cancer Center, Dana-Farber Cancer Institute, Yale Cancer Center, Johns Hopkins, MD Anderson, UCSF Helen Diller Cancer Center, UC Davis Cancer Center and the LUNGevity Foundation. They will be joined by Jeffrey Wigbels, a lung cancer survivor.

SU2C and ACS will each provide up to $10 million over the three-year life of the grant. Bristol-Myers Squibb is providing funding in the amount of $5 million to SU2C that supports the SU2C-ACS Lung Cancer Dream Team. This is one of 16 SU2C Dream Teams that have now been funded by the SU2C organization, and is the second one for the MGH. In 2009, the MGH Cancer Center was awarded one of the first Dream Team awards for their innovative research in the circulating tumor cell chip work led by Daniel Haber, MD, PhD, director of the Cancer Center, and Mehmet Toner, PhD, director of the BioMEMS Resource Center.

SU2C is a charitable program of the Entertainment Industry Foundation and was established by media and entertainment industry leaders to raise awareness and accelerate developments made in cancer research.

Submit news tips and story ideas to *MGH Hotline*

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

05.01.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

MGH team deploys to Nepal

DEVASTATING DESTRUCTION: At left, Everest Base Camp patient evacuation, and at right, a damaged home in Phe[illegible]che, Nepal.

PHOTOS COURTESY OF RENEE SALAS, MD

ON APRIL 25, a devastating 7.8-magnitude earthquake struck Nepal – the country's worst in more than 80 years. As the death toll continues to rise to more than 5,000, an additional 9,000 people have been injured, and there are thousands more without homes. The earthquake is a major catastrophe to the Nepalese people, as well as the country's infrastructure as a whole.

Despite the nearly 8,000 miles between Boston and Nepal, the earthquake has been felt here at the MGH, both personally and professionally. Two MGH physicians – Renee Salas, MD, and Lara Phillips, MD, both fellows in the MGH Wilderness Medicine Fellowship in the Department of Emergency Medicine – were working in Nepal at the time of the earthquake. They are both safe and have been working with Nepalese colleagues to provide lifesaving emergency care in rural areas hard hit by the earthquake.

"When enormous tragedies such as this strike, we as a global medical community are impacted regardless of the physical distance between us and the affected area," says Hilarie Cranmer, MD, MPH, director of Global Disaster Response in the MGH Center for Global Health. "Our thoughts and prayers are with the victims, families and our colleagues who are valiantly working to assist in relief efforts."

Cranmer adds, "Additionally, many within the MGH community are eager to help. We have just received a request for specifically skilled staff from International Medical Corps, with whom we have worked with in the past following Typhoon Haiyan in the Philippines and the Ebola response in West Africa."

In response to this request, a team of seven MGH physicians and nurses will be deployed to Nepal. Led by Miriam Aschkenasy, MD, deputy director, Global Disaster Response at the MGH Center for Global Health, the other team members are: Bijay Acharya, MD; Grace Deveney, RN; Annekathryn Goodman, MD; Kevin Murphy, RN; Jacquelyn Nally, RN; and Sheila Preece, NP. More staff members may be deployed in the future.

Those who would like to donate funds can do so through the MGH Emergency Response Fund, managed by the MGH Development Office. For additional updates on the situation in Nepal, visit *http://www.mghcgh.org/earthquake-in-nepal.* ■

MGH launches Research Institute

THIS MONTH, the MGH will launch its new Research Institute – an initiative to support, promote and guide the hospital's existing research enterprise. The Research Institute comprises more than 6,000 staff working across more than 30 research centers, institutes and departments, and is the largest hospital-based research enterprise in the nation.

"Research has been part of the hospital's mission since its founding nearly 200 years ago and has led to innovations such as the use of general anesthesia in surgery, a vaccine for tuberculosis and the modern PET scan," says Harry Orf, PhD, senior vice president for Research. "The new institute will help us take the steps necessary to maintain our leadership in medical innovation."

According to Orf, the Research Institute is intended to create a "front door" to the MGH research enterprise in order to better engage funding agencies and create

(Continued on page 4)

ORF AND SLAUGENHAUPT

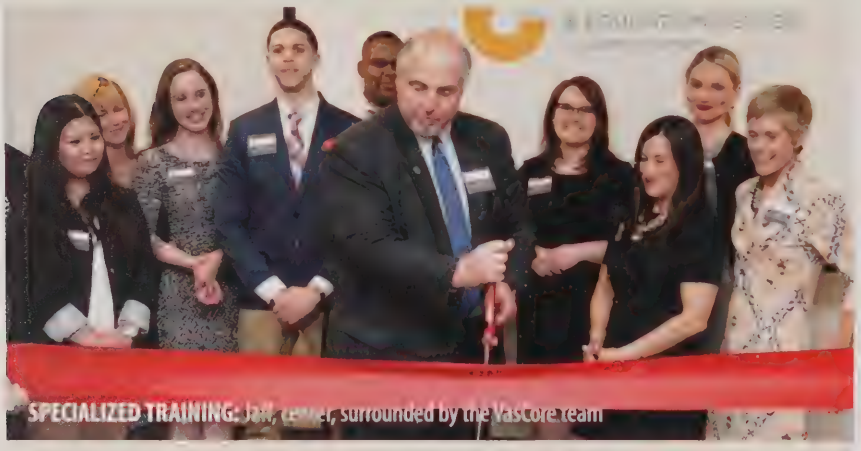
VasCore opens training facility for vascular professionals

ON APRIL 23, a ribbon-cutting ceremony was held to celebrate the opening of the VasCore Training and Education Center (VTEC), a groundbreaking facility and meeting hub in downtown Boston that aims to provide hands-on, customized training using the latest advancements in vascular imaging.

"VTEC will serve primarily as a unique training facility, using the latest imaging technology to assure the highest quality imaging as part of multicenter international clinical trials," said Michael R. Jaff, DO, founder and medical director of VasCore and the medical director of the MGH Vascular Center. "In addition, VTEC serves to improve the quality of testing by technologists and interpretation of images by physicians. We will accomplish this through the dynamic interaction between this classroom and our exam rooms. VTEC is also designed to promote global training and interaction using videoconferencing."

This highly specialized training will advance the decades of work VasCore's team has conducted globally to educate clinicians on how best to analyze and provide consistent ultrasound images of blood vessels, facilitating outstanding clinical trial results.

The VTEC team seeks to improve image quality through more standardized training that will assist researchers in obtaining better ultrasound exams across clinical trial locations, which will streamline both financial and time investment and produce better data.



SPECIALIZED TRAINING: Jaff, center, surrounded by the VasCore team

"Being here is the realization of so many different things that we have been thinking and talking about at board meetings for a number of years," said Cathy Minehan, chairman of the MGH Board of Trustees. "As we move forward in academic medicine, there is this question of how taking care of people in the place that they should be taken care of produces enough sense of ownership and revenue to keep the hospital's specialty services alive. With these revenue constraints, how do we then take those specialty services, continuously inform them with research, and create and deliver the high-tech care that we need to grow and prosper in the future? This education center and lab – with its focus on using imaging technology to expand the reach of our skilled practitioners – lies right at the sweet spot of all of the issues we've been talking about."

The 1700-square-foot facility located at 1 Bowdoin Square features a business center, lounge, classroom and imaging rooms dedicated to training, at capacity, 38 students per day. "Beyond training, we see VTEC's capabilities as limitless," Jaff said. "VTEC is perfectly suited – through its open architecture and its convenient location for private meetings – for our industry collaborators, scientific sessions, interactive meetings between key opinion leaders and personalized training sessions. On-site imaging exam rooms also will allow for advanced instructor-guided training through video in real time."

Since founding VasCore in 1997, Jaff and his colleague Gail L. Hadley, RN, RVT, FSVU, have trained hundreds of fellow clinicians, but the new education center will further expand those opportunities.

For more information, visit *www.vascore.org*.

CANINE CONGRATS: Slavin with Currahee

Honoring excellence

THE MGH CELEBRATED its 17th annual Partners in Excellence (PIE) Awards Ceremony on April 23, honoring 2,033 staff members. This represents 326 individual awards, 72 MGH team awards and five Partners HealthCare network team awards. Winners were nominated in one of six areas: quality treatment and service, operational efficiency, leadership and innovation, teamwork, community contributions and sustainability.

"On behalf of the MGH, I thank each and every one of you for your part in ensuring we offer the most excellent care possible for our patients and their loved ones," said Peter L. Slavin, MD, MGH president.

Currahee, a special canine guest, attended the ceremony to accept a PIE Award on behalf of Rescue, his friend and fellow service dog. Rescue's award was the result of the work he does for his owner and MGHer Jessica Kensky Downes, RN, who was injured in the 2013 Boston Marathon bombings. ■

IN MEMORIAM: Jean Holmes Mongan, a long-time MGH volunteer, a member of the Ladies Visiting Committee and the wife of the late MGH President James Mongan, MD, died April 25 after a long illness. Her smile, laugh and generous spirit were just some of her many notable trademarks. She was a wonderful friend to the MGH and she will be missed. From left, James and Jean Mongan with fellow volunteer Mimi McDougal.

MGH physician recounts days following devestating earthquake

RENEE SALAS, MD, of the MGH Wilderness Medicine Fellowship Program in the Department of Emergency Medicine, was in Nepal at the time of the earthquake. Salas was uninjured and remains in-country providing medical care with the Himalayan Rescue Association Nepal (HRA) in Pheriche, near the Mount Everest Base Camp. On April 28, she described the situation in an email to the MGH:

Where were you and what were you doing when the earthquake struck?

It was just after noon, and my colleagues and I were in the living space of the HRA clinic. As the realization set in to the events that were occurring, we ran outside to see nearly all of the buildings of the small village of Pheriche crumbling, at least partly. About a third were completely destroyed. In the midst of screams and dust clouds, we quickly circled the village after the earthquake vibrations had settled to see if there were any injured. Amazingly, the only injury was one small head laceration. If this disaster had occurred at night, I fear the injury rate would have been much higher. The village came together as everyone comforted one another and assisted those who had completely lost their houses. Some even began rebuilding their stones walls after the initial waves of aftershocks.

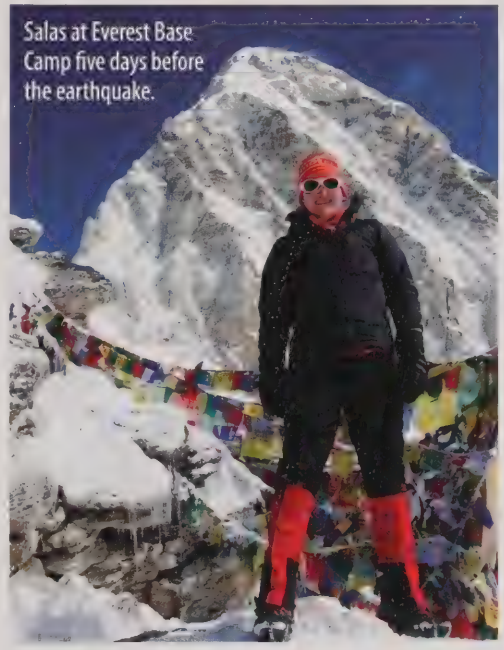
What did you experience/think at the time?

This was my first experience with an earthquake, and the severity of the earth's movement was astounding. I felt as if I was on a boat at sea. The immediate thoughts and concerns were to the status of the families of the Nepali workers here and to our HRA colleagues in Everest Base Camp and Manang.

Unfortunately, we had few means to gain credible information. We had been without Internet contact for the few preceding days, and this remained inoperable. We attempted to reach Everest Base Camp with the radio system we had in place but were also unsuccessful. Through conversations my Nepali friends had with family and the HRA headquarters in Kathmandu, we learned that it had affected the city but had no understanding of the severity. We then began to assess the damage to the clinic, which had thankfully affected only a portion of the living quarters and left the patient treatment area unaffected. The numerous aftershocks we experienced caused the village to remain outside for a good portion of the day. Unfortunately, it was snowing with moderate winds, which made this situation more difficult.

What have you been doing since?

The first patients from Everest Base Camp were two climbing Sherpas who arrived about nine hours after the earthquake, as they had immediately descended via foot and by horse. We saw and treated them – one moderately injured who was admitted overnight and one minor who was treated and released. We began to understand the gravity of what had occurred



Salas at Everest Base Camp five days before the earthquake.

at Everest Base Camp as they recounted their experiences. We initially remained awake believing that more would be arriving late that evening but soon retreated to the sunroom (a separate free-standing building across from the clinic) to sleep given the continued aftershocks.

We were awoken the next morning a little before 6 am to the sounds of helicopter traffic heading up the valley. We received word that they would be evacuating all of the critically ill and wounded from Everest Base Camp to our facility and quickly began preparing for the possibility of significant patient volume. This is exactly the type of mass casualty situation that my emergency medicine and wilderness medicine training prepared me for. We received approximately 10 critically ill patients first and placed them in the clinic and sunroom – many on makeshift beds placed on the floor. In total, we saw and evacuated an estimated 73 patients including many "walking wounded." Our resources here included intravenous fluids, medications and an ultrasound. However, we are a remote post without access to blood products or the ability to perform subspeciality procedures that many patients required. Luckily the weather cleared, and we were able to arrange further evacuation to a hospital in Lukla, which had increased resources. Numerous helicopters, including an MI-17 that could hold 16 to 18 patients, made numerous trips as all patients were evacuated over a five-hour time period.

The local and international community here in the region came together in a way unlike anything I have experienced. Locals from the village and neighboring town of Dingboche assisted with patient transportation, arranging supplies, and giving patients and volunteers tea and food. International trekkers with nonmedical backgrounds who were in the region assisted selflessly with patient transport and donated first aid supplies and materials. We had numerous international physicians, nurses and EMTs who spontaneously arrived and quickly set to work seeing patients, checking vital signs and administering medications.

When the last patient was evacuated, the nearly 100 to 200 people who had assisted all cheered and hugged one another for the amazing team effort, and then people dispersed back to their villages while many international trekkers continued their descent to lower villages.

What do you think is important for others to know now about the situation there?

This is a country full of loving people and the innately welcoming culture has created a collaborative and selfless post-disaster environment here in the Khumbu Valley. However, this a country with very limited resources. The situation in Kathmandu sounds grave, as medical facilities have been quickly overwhelmed and they have struggled to take care of patients in buildings in the continued wake of aftershocks. The situation in the more remote outlying villages is also unknown. As food and water resources dwindle and the lack of sanitation grows, the risk of epidemics is high, which will turn an already dire situation into a nightmare. The country will require basic needs such as food, water and medical and infrastructure personnel and supplies. Any assistance, depending on your resources and abilities, would be greatly appreciated – including prayers. ■

05.01.15

MGH HOTLINE

'Simply outstanding' patient care

THE KEY TO DELIVERING extraordinary patient care is all about the patient connection, says Rodney Lomax, a patient service coordinator in Neuroendocrine Associates and recipient of the 2015 Pamela J. Ellis Secretarial Memorial Award.

"The patient needs to trust us," Lomax says. "And that trust develops through the connection you have with them. It's very important."

Lomax was honored at the Administrative Support Staff Day luncheon on April 22 under the Bulfinch tent. Seventy-six nominations were received for the annual award, which is given to the top administrative support system, and recognizes Ellis, an executive secretary who died in October 1996.

The administrative and secretarial staff was welcomed with opening remarks by Jeff Davis, senior vice president for Human Resources. During the event, Peter L. Slavin, MD, MGH president, expressed his immense gratitude for the administrative staff's hard work and devotion to fulfilling the MGH's mission.

SUPPORT SYSTEM: Lomax, bottom row third from left, surrounded by his Neuroendocrine Unit colleagues

"This hospital has an important mission to serve the community, through four different missions – clinical care, research, education and community health," Slavin said. "I think it's fair to say that without your incredible work, none of those missions would come to life every day and every night. You make everything that we do possible."

Lomax – who has worked at the MGH in the Neuroendocrine Unit for eight years – was described in nominations submitted by his colleagues as "a key reason patients come back to the clinic," "a fantastic resource," and "a great patient advocate."

"It's truly an honor to be nominated and chosen for the Pamela J. Ellis award for 2015," Lomax said. "All of you are working at the greatest hospital on the planet, and I happen to be working with a great clinic. As you all know, we are all here for the patients to do whatever we can for them. The extra effort is not extra at all. They're here, they're hurting and they need help – and that's what we are here for."

A complete list of the nominees is featured in a framed plaque hanging on the wall opposite the MGH Gift Shop.

— *Research Institute*

(Continued from page 1)

new partnerships with the pharmaceutical, biotech, venture capital and philanthropic communities. Institute leadership is focused on establishing broader relationships with industry partners, finding new ways to bring these partners together with investigators.

"The MGH Research Institute will keep the hospital at the forefront of biomedical progress by providing the operational resources and infrastructure for our investigators to carry out cutting-edge research and ultimately to translate that work into improved care for our patients," says Orf.

Says Susan A. Slaugenhaupt, PhD, scientific director, "By creating the Research Institute, we aim to build a cohesive support system that will enable our researchers to continue their vital work in these challenging times. One way the institute will provide support is through the development of training programs to educate MGH investigators on how to better translate their discoveries into clinical care. It also will help our investigators build the bridge to connect the discoveries made in our labs to new therapies and prevention strategies for our patients. The institute will advocate for all research at the MGH."

The institute is led by a steering committee that includes the hospital's president, the senior vice president for Research, the scientific director, the leadership team of the Executive Committee of Research, the director of the Clinical Research Division, and the chiefs of Surgery and Medicine.

The Research Institute will participate in and host a series of events at the MGH to kick off the launch throughout the months of May and June.

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

05.08.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Molecular tumor diagnosis with a smartphone

A DEVICE DEVELOPED by MGH investigators may bring rapid, accurate molecular diagnosis of tumors and other diseases to locations lacking the latest medical technology. In their report appearing last month in *PNAS Early Edition*, the researchers describe a smartphone-based device that uses the same technology used to make holograms to collect microscopic images for digital analysis of the molecular composition of cells and tissues.

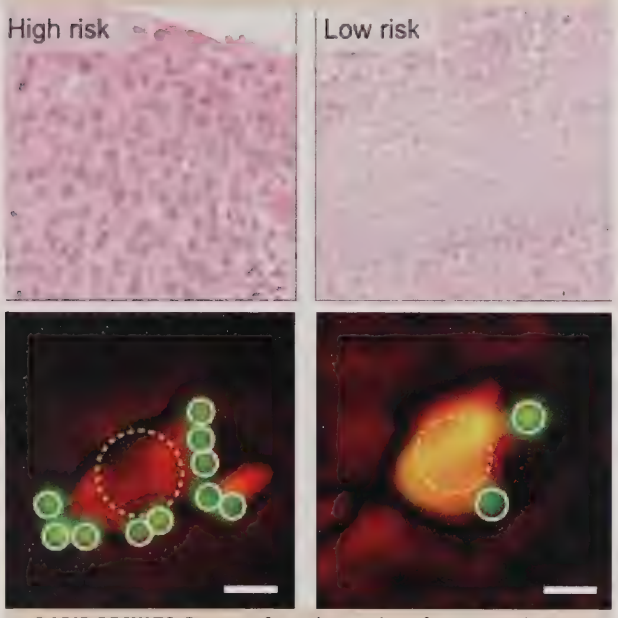


PHOTO COURTESY OF MGH CENTER FOR SYSTEMS BIOLOGY

RAPID RESULTS: By quantifying the number of tumor-marker-targeting microbeads bound to cells (lower images), the D3 system categorizes high- and low-risk cervical biopsy samples as well as traditional pathology (upper images) does.

"The global burden of cancer, limited access to prompt pathology services in many regions and emerging cell profiling technologies increase the need for low-cost, portable and rapid diagnostic approaches that can be delivered at the point of care," says Cesar Castro, MD, of the MGH Cancer Center and Center for Systems Biology, co-lead author of the report. "The emerging genomic and biological data for various cancers, which can be essential to choosing the most appropriate therapy, supports the need for molecular profiling strategies that are more accessible to providers, clinical investigators and patients. And we believe the platform we have developed provides essential features at an extraordinarily low cost."

The device the team has developed – called the D3

(Continued on page 4)

NURSING CEREMONY: From left, Cady, Portee, Folderauer and Ives Erickson

Honoring our nurses

"SIMPLY THE BEST." It was a phrase heard throughout the hallways and patient care units this week as the MGH celebrated National Nurses Week. Staff enjoyed an appreciation breakfast and high tea reception, as well as several presentations, the annual research poster session and an address by Jeanette Ives Erickson, RN, DNP, senior vice president of Patient Care and chief nurse.

"It has been quite an interesting year," Ives Erickson said. "We have faced adversity and celebrated significant success. During this year, we confronted racism, snowstorms, cold weather, hospital overcrowding and a Joint Commission survey. We implemented the first phase of Partners *e*Care, and we tested our Ebola response plan. And while all of this was going on, we continued to improve care delivery, and we enhanced teamwork and patient satisfaction."

As part of her keynote address, Ives Erickson invited retired Brig. Gen. Jack Hammond, executive director of the Red Sox Foundation and the MGH Home Base Program, and his family to share their personal story of appreciation for the care they received during a recent hospital stay. Hammond's son, Shea, received a kidney transplant in February, and soon thereafter Hammond wrote a heartfelt personal letter thanking the wonderful nursing staff for "dedicating their lives to helping those in need."

(Continued on page 4)

Advancing ACL care

FACT: An anterior cruciate ligament (ACL) tear is one of the most prevalent knee injuries in athletics. Athletes who participate in high demand activities – such as soccer, basketball, football, skiing or hiking – are at an extremely high risk for this injury.

In an effort to advance the field of ACL care, a team of nearly 30 experts from several MGH departments – including Orthopedics, Physical Therapy and Radiology – has come together to form the newly developed ACL Research Group. Over the next few years, this group will create a state-of-the-art ACL Center of Excellence focused on research, prevention, treatment, operative procedure, rehab and recovery.

"As we put together our MGH Sports Medicine ACL Center of Excellence, we know how important education and outreach are," says Peter Asnis, MD, an MGH Sports Medicine Service physician. "As I tell all of my patients, a perfect result after ACL surgery depends largely on three people: the patient, the surgeon and the physical therapist."

In order to enhance education and outreach for caregivers of ACL patients, the MGH Sports Medicine Department has teamed up with Northeastern University Bouvé College of Health Sciences to teach an in-depth, innovative course on ACL injury, care and rehabilitation. The course – "The ACL: Where Have We Been and Where Are We Now? A Comprehensive Approach to the Care of the ACL Injured Patient" – is associated with the education section of the ACL Research Group.

The 8-hour course – designed for physicians, physical therapists, athletic trainers, and strength and conditioning clinicians – is scheduled for June 13 at Northeastern University. Anyone involved in the continuum of care of patients that have had an ACL injury are encouraged to attend.

"A course like this is important to practicing clinicians to ensure we are providing the highest level of care possible," says David Nolan, PT, DPT, director of the MGH Sports Physical Therapy Clinical Residency Program and clinical specialist for MGH Sports Physical Therapy. "That care starts on the sideline at the time of injury and continues with surgical care, followed by rehabilitation and ultimately performance enhancement with return to work or activity."

Nolan says the course is the first step in advancing ACL surgery, care and rehabilitation, with the ultimate goal of enabling each patient to return to his or her life feeling stronger than before the injury.

There is a cost to attend. For more information, visit the Northeastern University website.

Addressing social, racial and ethnic disparities in health

"COLLECTING DATA about food security and housing is just as important as collecting information about insurance and language preference," said Monica Bharel, MD, MPH, the keynote speaker at the MGH's annual YWCA Stand Against Racism event.

Bharel, the former chief medical officer of the Boston Health Care for the Homeless Program and newly appointed commissioner of the Massachusetts Department of Public Health, presented "How Do Social Determinants of Health Impact Racial and Ethnic Disparities in Health?" The April 22 event – hosted as part of MGH's ongoing commitment to health equity and continued opportunities for open dialogue around issues of race – was sponsored by the MGH Center for Diversity and Inclusion, the Disparities Solutions Center and the Center for Community Health Improvement.

Bharel discussed how social determinants – such as education and food access – play a major role in overall health. Providers, she said, must treat an individual's whole situation, not just the presenting issue. She reflected on her own career in caring for the homeless and the importance of understanding the individual's situation as well as environmental influences. "You cannot just look at the individual's health but also the context or social factors. When you're working with a homeless person living under a bridge, you have to think about the social determinants and outside factors," said Bharel.

With community support, the Commonwealth is working toward providing targeted interventions and concrete resources that treat the whole person, said Bharel. Under her leadership, a shift toward data-driven care is underway to better provide necessary support where most needed. "If you don't measure it, how can you improve it?" she said.

During her presentation, Bharel pointed to a series of maps to show the correlation between poverty and disease rates in Boston's neighborhoods. Near Dudley Square station, poverty rates are highest, yet just three miles away near the Arlington station the lowest rates of poverty in the city are reported. Residents of the Dudley neighborhood also are disproportionately affected by higher rates of diabetes than their counterparts near Arlington, yet both communities are surrounded by world-class medical facilities. Bharel also addressed other health disparities in Massachusetts, including higher incidents of infant mortality and premature heart disease in adults from black and Hispanic populations. She challenged attendees to think beyond potential clinical reasons to social implications that could explain these differences.

"We know place matters. I'm here to work on solutions, together," she said.

The YWCA Stand Against Racism Day was initiated in 2008 to raise awareness that racism still exists in area communities. ■

Pediatric Urology Service welcomes new chief

ELDER

JACK S. ELDER, MD, has been named chief of the Pediatric Urology Service for MassGeneral Hospital *for* Children (MGH*f*C), effective April 15. Elder will oversee pediatric urology services, and work closely with MGH*f*C and MGH Urology leadership.

"Dr. Elder's expertise, combined with his passion and vision for the future, will help us continue to grow and strengthen the department," says Allan Goldstein, MD, MGH*f*C surgeon-in-chief. "With Dr. Elder's leadership, we look forward to expanding pediatric urology treatment in our community, including outpatient clinics and surgery at Danvers and Newton-Wellesley Hospital."

Adds Michael Blute, MD, chief of the MGH Urology Department, "As a renowned educator in pediatric urology, he will greatly enhance our education mission, service to community and access to MGH*f*C for pediatric urology. We are thrilled to have Dr. Elder join the MGH."

A graduate of Washington University, Elder obtained his medical degree from the University of Oklahoma. He completed his urology residency and obtained special training in pediatric urology at The Johns Hopkins Hospital, and completed a pediatric urology fellowship at Children's Hospital of Philadelphia. Previously chief of Pediatric Urology at Rainbow Babies and Children's Hospital in Cleveland, Ohio, Elder has also served as chief of Urology and associate director of the Vattikuti Urology Institute at the Henry Ford Health System in Detroit, Michigan, as well as president of the American Association of Pediatric Urology and president of the Society for Pediatric Urology.

With nearly 30 years of extensive clinical experience in managing both common and complex urologic conditions in children, Elder is nationally recognized as a leader in pediatric urology and has made significant academic contributions to the field, including special expertise in minimally invasive and robotic urologic surgery in children.

"I am thrilled to be able to work in the institution where my personal hero, Dr. Hardy Hendren – one of the pioneers of pediatric urology – practiced," Elder says. "There is a huge legacy here, and I look forward to further developing recognition of the division within Partners HealthCare and be a resource for pediatric urological services for our community." ■

Teams deploy to Nepal

AS THE NATION OF NEPAL continues to struggle following a 7.8-magnitude earthquake on April 25, the MGH has deployed two teams of volunteers to provide assistance. On May 3, a seven-member team volunteering with the International Medical Corps safely arrived in Nepal, joining two MGH physicians who already were working in-country at the time of the earthquake. The team, top photo from left, is Kevin Murphy, RN; Jacquelyn Nally, RN; Sheila Preece, NP; Miriam Aschkenasy, MD, MPH; Grace Deveney, RN, MPH; and Bijay Acharya, MD. (Not pictured, Annekathryn Goodman, MD). Earlier this week, in response to a request from Project Hope, the MGH Center for Global Health's Office of Disaster Response also sent an additional six-member team to help provide care, comfort and support to earthquake victims. They are, bottom photo from left, Hasmukh Patel; Nicholas Merry, RN; Russell Demailly, RN; Lindsey Martin, NP; Monica Staples, RN; and Paul Biddinger, MD. The second team deployed on May 7.

05.08.15

MGH HOTLINE

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Read *MGH Hotline* online at www.massgeneral.org/news/hotline or by scanning the QR code above.

Scoring goals off the ice

PICTURE PERFECT: Boston Bruins players Dennis Seidenberg, left, and Chris Kelly put aside their rugged on-ice personas to talk prom dresses with Shajvanie Moses when they visited MassGeneral Hospital *for* Children (MGH*f*C) on April 29. The hockey duo scored smiles with patients and their families as they went room to room on Ellison 17, 18 and Bigelow 6, passing out goody bags, signing autographs and posing for pictures. The visit was an auction item at the annual Storybook Ball, of which Seidenberg's wife serves as a co-chair. The 2014 Storybook Ball – which celebrated its 15th year of supporting pediatric health last October – raised more than $1.8 million to support MGH*f*C.

— Smartphone device

(Continued from page 1)

(digital diffraction diagnosis) system – features an imaging module with a battery-powered LED light clipped onto a standard smartphone that records high-resolution imaging data with its camera. With a much greater field of view than traditional microscopy, the D3 system is capable of recording data on more than 100,000 cells from a blood or tissue sample in a single image. The data can then be transmitted for analysis to a remote graphic-processing server via a secure, encrypted cloud service, and the results rapidly returned to the point of care.

"We expect that the D3 platform will enhance the breadth and depth of cancer screening in a way that is feasible and sustainable for resource limited-settings," says Ralph Weissleder, MD, PhD, director of the MGH Center for Systems Biology and co-senior author of the paper. "By taking advantage of the increased penetration of mobile phone technology worldwide, the system should allow the prompt triaging of suspicious or high-risk cases that could help to offset delays caused by limited pathology services in those regions and reduce the need for patients to return for follow-up care, which is often challenging for them."

Hakho Lee, PhD, of the MGH-CSB is co-senior author of the report, and research fellow Hyungsoon Im, PhD, is co-lead author.

— Honoring our nurses

(Continued from page 1)

"I am writing to pass on my thanks and appreciation to you for the incredible work, care, and support we received from the clinical staff – especially the amazing nurses at the MGH – during my son Shea's renal failure and kidney transplant," Hammond wrote. "Our family is forever grateful to the MGH for the caring and professional efforts that saved our son's life and healed our family."

During the week, staff also gathered for the annual Staff Nurse Reception and Military Cake Cutting Ceremony. Ives Erickson and new graduate nurse Hillary Cady, RN, BSN, of the White 8 General Medicine Unit, cut a cake using a vintage Army saber in honor of the 114th anniversary of the Army Nurse Corps. The pair was joined by U.S. Army representatives, Capt. Latoya Portee and Capt. Courtney Folderauer, RN, who has helped coordinate the ceremony for the past three years.

"I look forward to the year ahead, working with each and every member of our nursing team," Ives Erickson said. "Together we will prepare the next generation of nurses to meet the health care needs of patients, their families and how we will change care in the communities we serve. Thank you so very much for being the heart and soul of the MGH." ■

05.15.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

A new beginning

SHEA HAMMOND'S STORY begins in 2006, when he was 16. At a time when most teens think about homework, hanging out with friends and dating, Hammond was focused on finding a donor for his failing kidneys. One came through – his mother. The hope that the donated kidney would be accepted by his immune system was short-lived, however; within three years doctors diagnosed the organ as failing.

At 19, Hammond again had hope thanks to his father, retired Brig. Gen. John Hammond, executive director of the Red Sox Foundation and MGH Home Base Program.

During this surgery, doctors also removed both of the teen's own failed kidneys. All was well for five years until Hammond suddenly developed kidney stones, which were routinely removed. It soon became clear that the new kidney – his second in less than a decade – was failing.

"My prognosis was pretty grim," says Hammond. "On top of a likely five-year wait to get a kidney, I had a future of dialysis, which made me feel even more sick and tired. So I began searching for a third kidney. This was no easy task because my body had become more sensitized to donor kidneys."

Enter Colleen Martin, Hammond's cousin, who explored the concept of a kidney swap through the National Kidney Registry. With the long wait on a traditional donor list, Martin knew that may be the only viable solution. "There wasn't even a question in my mind. This was simply the right thing to do," she says.

Working closely with Anne Seaward-Hersh, RN, donor coordinator for the MGH Living Donor Program, Martin learned she was an excellent candidate for donation. In February, her kidney went to a patient in California, while Hammond's new kidney traveled from the same state for transplantation.

Martin and Hammond's surgeries at the MGH were part of the nation's largest kidney swap. In a three-month span, 34 kidneys were swapped among patients in 26 hospitals. The swap was completed in March.

"Paired kidney exchange is remarkably helpful in allowing patients like Shea who have antibodies against

(Continued on page 4)

Recognizing researchers

"RESEARCH IS A TEAM SPORT and your contribution is absolutely critical," said Maurizio Fava, MD, director of the MGH Clinical Research Program, during the second annual Research Staff Appreciation Day, held May 5 under the Bulfinch Tent.

The luncheon and ice cream social was hosted by senior leadership and organized by the Center for Faculty Development as a way to express its gratitude for its talented and dedicated staff members. "You fuel all of the research that is done at this hospital," said Harry Orf, PhD, senior vice president for Research. "Thank you for all that you do."

Orf said the idea to host the celebration was the result of feedback received from the MGH Continuous Research Operations Improvement suggestion box, illustrating how valuable the MGH finds the opinions, thoughts and ideas of its staff members.

During the event, Susan Slaugenhaupt, PhD, scientific director of the new MGH Research Institute, provided an overview of the new initiative, established as a hub to advance and channel the MGH's research efforts. "We are excited to launch this new undertaking as a way to support, promote and guide the hospital in the future, and we are thrilled that you are all a part of this amazing venture."

The sense of appreciation was felt throughout the Bulfinch Tent. "It's nice to be appreciated – even if it's something small," said Lauren Schroeder, clinical research coordinator in the Department of Anesthesia, Critical Care and Pain Medicine. "This is a wonderful event."

A similar Research Staff Appreciation Day took place at the Charlestown Navy Yard on May 6. ■

TASTY TREAT: Research staff, top photo from left, Michele Saums, Sandra Chan, Kelsey Ricci, Rachel Deering and Stacey Potter, all of the Cancer Center Protocol Office. Bottom photo, a happy attendee.

New chief for Foot and Ankle Service

CHRISTOPHER W. DIGIOVANNI, MD, a renowned orthopædic surgeon who specializes in foot and ankle care, has been named as the new chief of the MGH Foot and Ankle Service. He also will serve as chief of the Newton-Wellesley Hospital Foot and Ankle Service and will direct training in the combined foot and ankle fellowship between these programs.

"This appointment has given me a wonderful opportunity to help build a much needed regional foot and ankle center for the patients of New England and beyond," DiGiovanni says. "I look forward to joining other foot and ankle surgeons in the MGH Department of Orthopædic Surgery, as well as the rest of the medical community in Boston, and feel honored to become a member of this already outstanding foot and ankle team. There are few such places in the world where you can so readily assemble all the necessary components of subspecialty excellence inherent to delivering a clinical, academic, research, and innovative quality that is sure to bring national and international attention to this program, and it's one of the main reasons I chose to come here. Harry Rubash, MD, chief of the Department of Orthopædic Surgery, and I share a strong vision for the future of orthopædics in the field of foot and ankle care."

In addition to his position at the MGH, DiGiovanni oversees a number of national and international research endeavors in his effort to advance patient outcomes across this subspecialty. Prior to his appointment at the MGH, DiGiovanni spent more than a decade at Rhode Island-area hospitals.

DiGiovanni earned his bachelor's degree in biochemistry from Dartmouth College and his medical degree from the combined Dartmouth Medical School-Brown University Program in Medicine, after which he chose to remain at Brown to complete his residency in orthopædic surgery. He then pursued fellowships at Brown, Cornell University-Hospital For Special Surgery and at the University of Washington-Harborview Medical Center in Seattle. "I sincerely enjoy components of each in my daily practice," he says.

DiGiovanni also spends a great deal of time inspiring medical students, resident and fellows through surgical education, clinical research and creative design. Beyond patient care, he describes teaching and mentorship as one of his true callings in medicine that "gets him up every morning so excited to come to work."

Says Rubash, "It is a great pleasure to welcome Chris to the MGH community. He is immensely talented, an outstanding clinician and surgeon, and will guide the basic translational and clinical aspects of foot and ankle surgery for the department and the MGH for years to come. We are pleased to have him." ■

Waltham center opens

A NEW FOOT AND ANKLE CENTER located in Waltham – which DiGiovanni heads – opened earlier this year. The center's surgeons and podiatrists provide personalized patient care to treat the complete spectrum of lower extremity problems using state-of-the-art technology.

The new center features in-house operating room capability, podiatric expertise in brace, wound and non-operative foot care, ultrasound/mesenchymal stem cell/PRP/shockwave therapies, and a new 4,000-square-foot retail store, which will offer medical or surgical supplies and assistive devices.

"The world-class, comprehensive team we have assembled in this new center is extremely dedicated to clinical excellence in the field of foot and ankle care, and I feel quite fortunate to have been permitted to become a part of this group," DiGiovanni says.

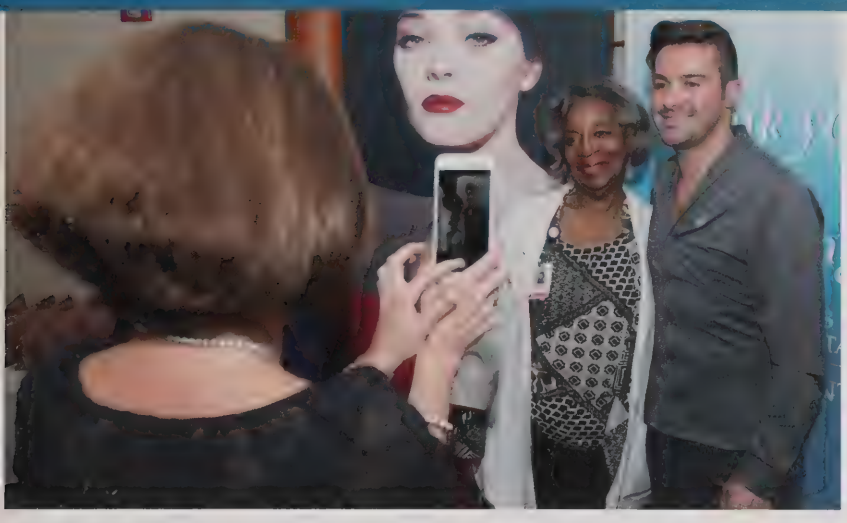
Partnerships promote education, awareness

THE MGH recently participated in two opportunities aimed at raising awareness for early detection and proper treatment of cancer.

With the help of the Farrah Fawcett Foundation and an anonymous donor, the MGH Cancer Center and Holy Cross Hospital in Fort Lauderdale, Florida, partnered to raise awareness of the signs and symptoms of anal cancer. On March 28, the two organizations co-hosted a seminar, "Anal Cancer: Today's Approach, Tomorrow's Strategies," to discuss effective treatment strategies, the near-term and long-term effects of treatment, and new approaches to therapy in advanced stages of anal cancer.

The seminar featured, top photo from left, Theodore Hong, MD, director of Gastrointestinal Service in the Department of Radiation Oncology; Eunice Kwak, MD, PhD, of the Department of Hematology Oncology; Lav Goyal, MD, of Holy Cross Hospital; Lorraine Drapek, RN, in the Department of Radiation Oncology; and Z. Ena Segota, MD, of Holy Cross Hospital.

At an event in Boston, Adam Feldman, MD, of the MGH Department of Urology, bottom photo third from left, was surrounded by supporters – including Senate President Stanley Rosenberg, Senate Majority Leader Harriette Chandler, and Celtics legend Cedric Maxwell – as Gov. Charlie Baker declared April 16 Prostate Cancer Awareness Day in Massachusetts. The announcement was part of the seventh annual Prostate Cancer Awareness Day at the State House. ■



PICTURE PERFECT: Gwendolyn Mitchell, LPN, of the Gillette Center for Women's Cancer at the MGH, poses with makeup artist Alberto Espinoza-Cervantes after receiving a makeover.

A beautiful thank you

A SINGLE RED FLOWER sits in a small vase in the center of a table full of beige Giorgio Armani cosmetic bags, each filled with a variety of makeup samples. It is a token of appreciation amongst a sea of gratitude. "Look at that," Tim Quinn says, pointing to the flower, given to him by an MGH nurse. "It's amazing how wonderful the nurses here are."

The same could be said – and often is – about Quinn. This marks the fifth year that the national director of creative artistry for Giorgio Armani has come to the MGH during Nurses Week to provide a day of makeovers for the Cancer Center nursing staff. Quinn, who in 2007 was treated at the hospital for testicular cancer, says the event is a way to give back to the nurses who were an integral part of his healing process.

"I want these nurses to feel as appreciated as we are of them," he says. "This isn't about makeup. It's about making people feel special. We all live really busy lives, and sometimes no one takes the few minutes to do something fun, something that makes them feel good about themselves. Nurses have one of the toughest jobs, and this is a way to give some of the great energy they give back to them."

Throughout the day, nurses stream in to the conference room in the Lawrence House, taking a seat at one of the many stations set up around the room. After a makeover and a fun overview on what types of moisturizer, foundation, mascara and eye shadow might work best in their busy schedules – they leave, smile planted firmly on their newly glossed lips and one of the cosmetic bags tucked under their arms.

Also in attendance at this year's May 7 makeover event was Carol Hamilton, president of L'Oréal Luxe USA. A close friend of Quinn, Hamilton also will be honored next month at the MGH Cancer Center's **the one hundred** event, an annual celebration of those who have made a difference in cancer care. "Tim is a dear friend of mine, and the experience he went through and the care he received was incredible. You saved his life," Hamilton says. ■

HAMILTON AND QUINN

Partners eCare clinical cycle go-live dates finalized

THE MGH HAS FINALIZED THE KEY DATES for the clinical cycle implementation of Partners eCare. Emergency/Urgent Care, Inpatient and Operating Room/procedural areas will go live on April 2, 2016, when the hospital will launch the new clinical modules to support Oncology, Radiology, Pharmacy, Obstetrics, Transplant and Cardiology. Ambulatory practices will go live in a phased approach:

- **Dec. 10, 2015** – Ambulatory practices for Dermatology, Psychiatry and the health professions
- **Jan. 14, 2016** – Ambulatory practices focusing on Nutrition, Surgery (Longitudinal Medical Record or LMR practices only) and Pediatrics
- **Jan. 28, 2016** – Ambulatory practices focusing on Primary Care (LMR practices only), Neurology and the Weight Center
- **April 2, 2016** – Inpatient, ED/Urgent Care, procedural areas and all remaining ambulatory practices

As part of the Partners eCare rollout at the MGH, staff should work with their supervisors to plan vacations and other time out of the office during these critical launch times. It is important for staff members to be present one week prior to and two weeks after their go-live date. However, each department will have its own constraints around staffing, and managers and supervisors may decide to limit vacation time for staff for a longer period of time to ensure proper staffing levels.

Training sessions are being finalized, and dates and locations will be announced in the coming weeks.

Town hall meetings

TO HELP STAFF BETTER PREPARE for the clinical launch of MGH Partners eCare, the hospital will host monthly town hall meetings covering different topics about the new enterprisewide electronic medical record system.

All staff are invited to join the first meeting, from 1 to 2:30 pm on May 19, in the O'Keeffe Auditorium. The meeting will be recorded and available online for future viewing.

This and future town hall meetings will allow staff to learn more about this next phase in the Partners eCare implementation at the MGH. Each meeting will typically be 90 minutes, composed of a 45-minute presentation followed by a 45-minute question-and-answer session.

Futures sessions in the O'Keeffe Auditorium are scheduled for:

- June 17, from 4 to 5:30 pm
- July 20, from 10:30 am to noon
- Aug. 25, from 2:30 to 4 pm
- Sept. 14, from 3:30 to 5 pm
- Oct. 21, from 3:30 to 5 pm (in the Haber Auditorium)
- Nov. 20, from 7:30 to 9 am
- Dec. 14, from 2 to 3:30 pm

05.15.15

MGH HOTLINE

Speak up for safety

Kelly Doherty, of the Yawkey 8 Pharmacy, right, is congratulated by Jana Deen, senior director of Patient Safety in the MGH Center for Quality and Safety. By speaking up for safety and participating in the hospital's Safety Culture Survey raffle, Doherty was entered into a drawing in which she was the first winner. She took home an autographed Julian Edelman football. The Safety Culture Survey is open to all inpatient providers and employees with direct patient care and is available through the first week in June. A link to participate with the subject line "MGH Safety Culture Survey" was sent to staff from *support@pascalmetrics.com*. Additional prizes will be raffled off throughout the survey period.

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

— A new beginning

(Continued from page 1)

their donor candidate's kidney or a blood group incompatibility to receive a lifesaving kidney transplant," says Eliot Heher, MD, medical director of the MGH Kidney Transplant Program. "Of course, paired kidney exchange relies on willing donors, who are amazing altruists who agree to undergo surgery they don't need on behalf of someone else. Each exchange requires complex logistics, which have become much more sophisticated over the last few years."

Despite a lifetime encompassing more than 40 surgeries at the MGH, Hammond is now on the mend, and he has maintained a positive attitude.

"Kidney failure halted all aspects of my life completely and was likely to reduce my life expectancy significantly. I had to stop working and stop supporting myself. Despite its benefit, I felt horrible on dialysis and had absolutely no energy to do anything on days I received it. Because of Colleen's generosity, I and everyone involved in this chain are finally on track to get our lives back," says Hammond.

Heher adds, "Thanks to the attention to detail from Anne and her group, everything came together for a successful outcome for Shea that we are all thrilled about."

Seven myths about living kidney donation

THE MGH KIDNEY TRANSPLANT PROGRAM provided insights into some of the top misconceptions they hear about living kidney donations.

I have to live in New England or near the MGH to donate

√ While evaluations can take more time with an out-of-town donor, MGH patients have received kidneys from donors who come from dozens of states and from as far away as India.

I have to be related to a recipient to donate

√ Today's immunosuppressants or anti-rejection drugs mean tissue typing is less important when identifying a potential donor than it was in the past. Consequently, unrelated living donation has increased dramatically over the last 10 years. Of course, all living donor candidates still must undergo a thorough evaluation prior to donation.

I can only donate to some someone who has my blood group

√ Thanks to paired kidney exchange and ABO (blood group) incompatible donation, incompatible donors are often able to donate directly to a recipient or participate in the paired recipient program. In addition, anyone can receive a kidney from a blood group O donor, which is widely considered "the universal donor."

The pain is terrible and there is a long recovery

√ As with all surgeries, there is some level of pain involved – mostly related to the actual incisions – as well as some bloating and gas. Kidney donors are given pain medication to successfully manage discomfort and in the days following surgery will see a marked decrease in these issues. Most donors are in the hospital for two nights and will be out of bed walking before being discharged.

I will lose half my kidney or liver function and will be more susceptible to kidney-related issues in the future

√ While donating a kidney is major surgery, it has not been shown to reduce the donor's life expectancy. In addition, the donor's remaining kidney is able to partially compensate for the kidney they have donated.

I will lead a limited lifestyle after donation (I cannot drink alcohol or become pregnant, etc.)

√ A healthy diet is always advised for patients, but there are no specific dietary restrictions following surgery, including moderate alcohol use. Additionally, living donors are able to return to regular activities approximately four to six weeks after surgery. Past donors have even been approved to return to active duty military service following donation.

I cannot afford the medical costs associated with donation

√ A recipient's medical insurance often covers the medical expenses related to donation.

EDITOR
Colleen Marshall Delaney
617-726-0275

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

05.22.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

BELL AND CASSIDY

CONNORS AND CHRISTIINE MUSZALSKI, RN, EMT

MGH patients reunite with Boston MedFlight crews

WHEN COLLEEN CASSIDY got on her bicycle last September in search of fresh cucumbers, she didn't know she would be taking the ride of her life. Pedaling down a quiet road in Martha's Vineyard, Cassidy suddenly lost control of her bike and flew over the handlebars, suffering – among many others – a significant head injury.

"I don't remember much of the accident at all, but I think the cucumbers in my basket must have thrown my balance off," she says. "The next thing I remember was waking up at the MGH wondering what happened."

Cassidy could not remember how she got to the hospital. Unconscious at the time, she was airlifted by Boston MedFlight (BMF) from Martha's Vineyard Hospital to the MGH where teams of caregivers awaited her. Though her recovery was far from certain at the time, Cassidy would eventually pull through and now has returned almost fully to her normal lifestyle. On May 17, Cassidy got the chance to meet – and thank – the BMF air crews who helped to save her life during a special reunion marking BMF's 30th anniversary. The celebratory event was attended by nearly 400 patients and their family members, many of whom had been transported to the MGH.

"It's so rewarding to be able to meet the patients we have taken care of," says Aaron Bell, CFRN/EMT, who cared for Cassidy during

(Continued on page 2)

REMARKABLE IMPROVEMENT: Channick with Conron

Celebrating survival: Reunion marks success of curative program

THE MGH PULMONARY HYPERTENSION AND THROMBOENDARTERECTOMY PROGRAM will soon mark a milestone, completing its 100th life-changing procedure. To mark the celebratory occasion, the department hosted a reunion on May 5, giving patients and their families an opportunity to share stories and thank MGH caregivers.

"Our patients have such remarkable improvements after surgery; we are really offering them the ability to look forward to a life they wouldn't have had without pulmonary thromboendarterectomy (PTE). These patients are living proof that – with the right care – it is never too late for a second chance," says Richard Channick, MD, director of the program.

PTE is a highly specialized operation to remove chronic blood clots from the lungs. Without surgery, patients with this life-threatening disease will likely develop progressive shortness of breath so severe it

(Continued on page 4)

Celebrating MGH's commitment to community and equity

DURING A SPECIAL JOINT CEREMONY at noon on June 4 in the Bulfinch Tent, the MGH Center for Community Health Improvement (CCHI) will mark its 20th anniversary, and the MGH Disparities Solutions Center (DSC) will celebrate its 10th year.

The event will welcome guests including Boston Mayor Marty Walsh; Garth Graham, MD, president of the Aetna Foundation and former deputy assistant secretary of the U.S. Department of Health and Human Services; and Victoria Reggie Kennedy, attorney and wife of the late Massachusetts Sen. Edward Kennedy.

CCHI was founded in 1995 to partner with underserved communities to make measureable improvements in social and economic determinants of health and to reduce barriers to care for vulnerable populations. The center's deep engagement with local underserved communities as well as national health care stakeholders has resulted in measureable improvement in some key health indicators in local communities. This work holds promise for managing the health of populations and for improving quality and efficiency of health care services.

Since 2005, DSC has worked with organizations around the country to improve health care quality for every patient – regardless of race, ethnicity, culture, class or language proficiency. The DSC creates change by developing new research and translating the findings into policy and practice; finds solutions that help health care leaders, organizations and key stakeholders ensure that every patient receives high-value, high-quality health care; and encourages leadership by expanding the community of health care professionals prepared to improve quality, address disparities and achieve equity.

BLEEDINGDETECTOR: The APPRAISE system

Computerized vital signs analysis may help trauma patients

AUTOMATED ANALYSIS of the vital signs commonly monitored in patients transported to trauma centers could significantly improve the ability to diagnose life-threatening bleeding before patients arrive at the hospital, potentially saving many lives. In the May issue of the journal *Shock*, a research team from the MGH, the U.S. Army, air ambulance service Boston MedFlight, and two other Boston trauma centers report successful field testing of an automated system that simultaneously analyzes blood pressure, heart rate and breathing patterns during emergency transport, finding that it accurately detects most cases of life-threatening bleeding.

"Providing faster care to patients who are bleeding to death saves lives," says Andrew Reisner, MD, of the MGH Department of Emergency Medicine, senior author of the *Shock* paper. "While the clinical information that ambulance crews call in to trauma centers was sufficient to determine the presence of a life-threatening hemorrhage in about half the patients we studied, many other patients were in a 'grey area' and may or may not have been at risk of bleeding to death. Our study demonstrated that automated analysis of patients' vital signs during prehospital transport was significantly better at discriminating between patients who did and did not have life-threatening hemorrhage. Receiving more reliable information before the patient arrives can help hospitals be ready for immediate surgery and replenishment of lost blood without wasting time and resources on false alarms."

The system, dubbed APPRAISE (Automated Processing of the Physiological Registry for Assessment of Injury Severity) and consisting of an ultracompact personal computer networked to a standard patient monitor, was installed in two MedFlight helicopters and collected data on more than 200 trauma patients transported to participating Boston hospitals betweem February 2010 and December 2012. The group is now working on a follow-up study to use the system in actual trauma care and will measure whether it truly leads to faster treatment of life-threatening hemorrhage and better patient outcomes. ■

— *Medflight reunion*

(Continued from page 1)

her flight. "So often you see them when they are badly injured, and it's amazing to see so many of them after they have made such wonderful recoveries."

Joining Cassidy at the celebration were other MGH patients, including John Connors of Stoughton, Massachusetts. BMF transported Connors to the MGH from an area hospital following complications from a heart procedure and subsequent heart attack in July 2014. Following a stent procedure at the MGH, Connors reports he is doing quite well and is thankful to the BMF crew for bringing him to Boston. ■

App aimed to help children with food allergies

LIVING WITH FOOD ALLERGIES can be scary. Researchers estimate that some 15 million Americans are living with food allergies, including 1 in 13 children under the age of 18. As technology becomes increasingly integrated into everyday lives, a new solution is now available to help caregivers and children navigate through the preparation and process of an oral food challenge, a diagnostic test that confirms or rules out allergies through consumption of the suspected food.

Inspired by her patients and her two adult sons who live with food allergies, Elisabeth Stieb, RN, BSN, of the Food Allergy Center at the MGH and MassGeneral Hospital *for* Children, developed "My Food Challenge," the first-of-its-kind app about food challenges.

"As a food allergy nurse, parents always ask me if there was something they could show their kids before their scheduled food challenges appointment," Stieb says. "We have pamphlets and videos that provide information about the basic elements of a challenge, but there was nothing to prep the kids who were actually goingthrough the process. I wanted something that aimed toward younger children – between the ages of 4 and 8 – when many patients undergo oral food challenges."

Stieb started the project nearly seven years ago and worked closely with Wayne Shreffler, MD, PhD, director of the Food Allergy Center, to develop the script and provide an accurate description of oral food challenges. With vivid illustrations, created by Stieb's sister-in-law, and realistic dialogue, readers can follow Matthew, the subject of the app, as he undergoes two different food challenges in his doctor's office.

"Oral food challenges are essential to the diagnosis of a food allergy," Shreffler says. "The Food Allergy Center conducts nearly 15 oral food challenges a week with more than 1,000 to date, but it can still make some families anxious."

During the challenge, a child who has tested positive to allergens in blood and skin tests is fed – in a highly controlled setting – incremental amounts of the very foods to which he or she appear to be allergic. If there are no symptoms, the child will gradually receive increasingly larger doses. If the child shows any signs of a reaction, the food challenge will be stopped.

STIEB
Matt, if you can have egg there will be lots more food that you can eat. The food challenge at the clinic is the safest place to figure this out.
Hmmm, this sounds like a good idea.

"My hope is that the app will de-mystify the process of having a food challenge," Stieb says. "It's great to now be able to give our patients and their families an innovative resource that walks them through the entire process, and still makes it fun."

Adds Shreffler, "Elisabeth takes initiative in countless ways every day, but this is an extraordinary example of her creativity and initiative as an educator."

The "My Food Challenge" app is now available in the iTunes App Store, and a portion of the proceeds will benefit the MGH Food Allergy Center. ■

Tarbell lecture focuses on patient-centered hospital advancement

KATE WALSH, president and CEO of Boston Medical Center (BMC), was the keynote speaker at the seventh annual Nancy J. Tarbell, MD, Faculty Development Lectureship on May 13 in the Thier Conference Room. Walsh, a former senior vice president of MGH Medical Services and the MGH Cancer Center, presented "Risky Business: A Career in Health Care," providing an overview of her leadership strategies with a focus on BMC's rapidly changing financial landscape and the hospital's patient-driven approach to strategic decision making.

Walsh described the leadership challenges related to delivering comprehensive care to low-income patients. "We start every day with the opportunity to deliver services to patients – but that's wrapped in a government envelope that is rapidly shrinking daily." With more than 50 percent of the BMC patient population insured by Medicaid, Walsh discussed how health care reform and the economic downturn have led to increased hospital financial strain. "People say, 'I can't cut the budget because quality will suffer.' We actually saw our quality measures improve while reducing the budget," said Walsh.

During her presentation, Walsh also reflected on BMC's effort to ensure that all patients have access to basic necessities through its preventative food pantry. When it first opened, the pantry distributed provisions to 500 people, but demand now has surged to 8,000 patients each month. The service, which allows

(Continued on page 4)

COMPREHENSIVE CARE:
From left, Peter L. Slavin, MD, MGH president; Walsh; Tarbell and Anne Klibanski, MD, director of the Center for Faculty Development

05.22.15

MGH HOTLINE

Change in Hotline schedule

MGH Hotline will not publish May 29 because of the Memorial Day holiday. The regular publication schedule will resume June 5.

Announcements available online

To read this week's "What's Happening" items, visit [illegible]

Submit news tips and story ideas to *MGH Hotline*

EDITOR

[illegible]

EMAIL

[illegible]

MAIL

[illegible]

MGH Hotline is published weekly by the MGH Public Affairs Office.

Printed by MGH Printography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

LEVY

Discovering how dads develop

SINCE ITS FORMATION IN 2013, The Fatherhood Project, an MGH Psychiatry Department program, has continued to grow and expand its research-based direct services for fathers and its programs for health care professionals. Activities, curricula and materials developed by the program are aimed at helping men become better fathers by learning how to emotionally engage with their children.

The Fatherhood Project recently teamed with the MGH Vincent Department of Obstetrics and Gynecology to launch a survey for new or expectant dads about their parental role. This survey will be given to fathers who accompany their partner or spouse to obstetrics appointments. "The goal of the survey is to help us address how men feel at each stage of the obstetrics consultation process," says Raymond Levy, PsyD, director of The Fatherhood Project. "Our research finds that men feel vulnerable and unsure of where they fit in at appointments in the prenatal process and in the infancy stage. Together with Hiyam Nadel, RN, of Obstetrics, and her staff, we hope to develop new services that better engage men in the life of their newborns and beyond."

The survey period will open later this month and run for two weeks. Levy says he hopes to have a survey population between 400 and 500 men.

"We anticipate the results will help us improve how fathers are incorporated in each obstetrics appointment. This will involve training for staff of the obstetrics and pediatrics services at the MGH about the importance of including fathers who attend prenatal and infant visits. Even subtle cues for staff members – such as addressing fathers directly – can truly make them feel welcome and involved," says Levy.

For more information about The Fatherhood Project, visit *www.thefatherhoodproject.org* or email *connect@thefatherhoodproject.org*. ■

— *PTE reunion*

(Continued from page 1)

will lead to heart failure. During PTE surgery, patients are placed on a heart-lung machine and their body is cooled to 65 degrees Fahrenheit – placing the patient in circulatory arrest. The surgeon then carefully peels the problematic blood clots away from the inner surfaces of the vessels throughout the lungs.

John Conron, 39, a Massachusetts State Police Trooper in the Computer Crimes Unit, understands firsthand the operation's benefits. A three-time survivor of pulmonary embolism, Conron struggled with simple daily activities in both his personal and professional life. "Things happened quickly, and thankfully, the impact to my career was limited. But had my condition not been treated swiftly and properly, I would have had to consider retiring. It would have worsened, and I wouldn't have been able to pass a simple physical fitness test," Conron says. "My sons were also affected. On a trip to the Southwick Zoo, we approached an incline at one of the habitats, and I had to slow down so much that I sent the boys ahead so as to not hold them back."

In 2009, Channick – in close partnership with thoracic surgeon Cameron Wright, MD, and cardiac surgeon Gus Vlahakes, MD – established the MGH program, which is now the second largest in the nation. He notes that the procedure takes the delicate hands of experienced surgeons. "The PTE program is a true multidisiplinary effort, in which surgeons, pulmonary specialists and intensivists all play vital roles. By establishing this program, we're providing a regional and East-Coast-based service to those who might not otherwise have access to this curative treatment," says Channick.

Adds Conron, "After surgery, I've noticed dramatic changes in my lifestyle. I'm not hesitating to jump into physical activities with my sons. Before I would always worry about getting worn out mid-activity. Now I'm taking long bike rides with them and have made an effort to get all of us jogging together, which was something I would have never dared to consider before surgery. I'm so grateful to the surgical staff that prepared me and to the MGH staff who helped me recover."

— *Tarbell lecture*

(Continued from page 3)

providers to write "prescriptions" for food, runs in partnership with the Greater Boston Food Bank, which provides more than 10,000 pounds of food each week.

Moving beyond practical examples to her career philosophy, Walsh stressed that although health care leaders are faced with many challenges resulting from the need to bend the cost curve, it is their obligation to do this work. "We are privileged to do what we do. It's in vogue to say 'there's too much change,' but if we complain, we are missing an opportunity to lead our industry through these changes."

The Tarbell lecture offers an educational opportunity to promote both professional and personal growth for MGH faculty. The lecture was established by the Center for Faculty Development to honor Tarbell, the center's founder. For more information, visit *www.massgeneral.org/facultydevelopment.*

06.05.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Celebrating the work of research fellows

SMILING AND ADMIRING the award in his hand, Giovanni Piantoni, PhD, a postdoctoral fellow in the Sydney Cash Cortical Physiology Laboratory at the MGH, was surprised to see his name already engraved on the Hassan Poster of Prestige Award. "How cool!" he said, before quickly praising his team and thanking the patients that made the research award possible. "We work side-by-side with a great clinical team and technicians dedicated to the treatment of epilepsy and are fortunate to have the opportunity to get close with patients on a personal level. Their collaboration is fundamental to our research."

On May 27, Piantoni was one of 12 fellows honored at the Research Fellows Poster Day celebration, hosted by the Office for Research Career Development in the MGH Center for Faculty Development. The MGH community was invited to view the posters on display in the Bulfinch tent to learn more about the groundbreaking work taking place at the hospital. The newly launched MGH Research Institute sponsored a number of this year's poster awards, which were divided into four categories: four posters of merit, three posters of excellence, three of distinction and two Hassan Posters of Prestige Award winners.

POSTER HONOREES: Award winners honored by MGH senior leaders

"We are thrilled to celebrate a very talented group of young scientists who are in the pipeline to research leadership in the future," said Anne Klibanski, MD, director of the Center for Faculty Development. "Their accomplishments span basic to translational and clinical research

(Continued on page 4)

STAY GOLD: Bartosz is recognized during the event.

Creating hope and inspiring action

ON MAY 26, THE MGH CANCER CENTER celebrated the eighth annual **the one hundred,** an event honoring 100 individuals and groups whose commitment to the fight against cancer creates hope and inspires action. More than $2.1 million was raised to support the Cancer Center and nearly 1,000 guests attended the event at the Westin Copley Place in Boston.

The event was co-chaired by Patti and Jonathan Kraft, president of the New England Patriots, and Katherine Chapman and Tom Stemberg, founder of Staples. The diverse group of 2015 honorees included "everyday amazing" people from Boston and around the world. They ranged from public figures and small town heroes to children and esteemed physicians.

Throughout the evening, video vignettes told the stories of honorees like Kathy Crosby-Bell, the mother of Boston firefighter Michael Kennedy, who died last year while battling a 9-alarm fire in Back Bay. Crosby-Bell established a foundation to purchase washing machines and dryers for area firehouses to clean potentially life-threatening carcinogens from soiled gear.

Also highlighted was Tony "The Fridge" Phoenix-Morrison from Newcastle, England, who runs marathons with a 93-pound refrigerator strapped to his back to raise money and awareness for cancer research. He plans to donate funds raised from his next run to the MGH Cancer Center.

And Annie Bartosz, a 13-year-old from Wisconsin, was recognized for founding the "Gold in September" organization to support childhood cancer research in memory of her twin brother Jack.

Despite their differences, all of the evening's stories shared a common message: everyone can make a difference in the fight against cancer. The night also provided an opportunity for the Cancer Center to share its story. Since its founding 27 years ago, it has become a

(Continued on page 4)

Song of appreciation

WHEN A PERSON is diagnosed with cancer, it often can be daunting to process all of the emotions involved before assessing the best course of treatment. In the case of MGH Cancer Center patient Maureen Condon, this was a reality she faced – twice. She was diagnosed with breast cancer in 2009 and colon cancer in 2013.

"Both times, the doctors, nurses and technical staff at the MGH treated me with the highest level of medical expertise and the greatest kindness," says Condon. "I'm healthy now, back to my normal life and am extremely grateful. A simple thank you to everyone involved in my care didn't seem adequate, so I decided the best way for me to say thanks was by writing and recording a song dedicated to them. It's called, 'You Were There.'"

Condon's song focuses on her personal journey from diagnosis through treatment. Among the lyrics devoted to her care team are:

You were there, the day I got the news,
When I had so much to lose,
You were there,
In darkness of that night, when all I knew was pain,
Didn't even know your name,
You were there for me,
You cared for me, you were there.

"All of us are so touched that Maureen took the time and effort to record such a lovely tribute to our department," says Douglas Ross, MD, of MGH Thyroid Unit Associates. "Our primary goal is to always help patients return back to the lives they had prior to cancer, and in Maureen's case, we are extremely pleased at the outcome."

Adds Paul Shellito, MD, of the MGH Department of Surgery, "It's always rewarding to see patients thrive after completing treatment for cancer – a process that can be difficult for even the strongest people. Maureen's song sums up our principal concern, which is not only to treat patients but also to be there for them in any capacity we can."

Condon says, "I owe my life – twice – to the people of the MGH and I will forever be grateful." To hear Condon's song, visit *http://bit.ly/1dMcOWi*.

CONDON

IN MEMORIAM

Donald Francis, RN, BSN

DONALD R. FRANCIS, RN, BSN, a beloved member of the MGH community, died May 28 at the age of 58. Francis was a rock star both at work and onstage. As a nurse in the MGH Blood Transfusion Service (BTS), he comforted, calmed and compassionately cared for his patients. But away from the hospital, Francis was a lifelong musician and co-founder, frontman and guitarist of Another Friday Night, a classic rock band he played in with his son, Charles.

Francis also was a dedicated nurse for most of his life – working in a variety of specialties before arriving at the MGH in March 2007. "Don was greatly appreciated by his patients and their families for his warmth, his kindness and his knowledge. He would do anything he could to help them while under his care," says Jane Ritzenthaler, RN, BTS Unit nurse manager. "Don's colleagues appreciated his continual willingness to teach, his patience, his understanding and his assistance with various kinds of patient care challenges."

In 2013, Francis was honored at **the one hundred** gala, the MGH Cancer Center's annual fundraiser recognizing people and organizations that have made significant contributions to advancing the fight against cancer.

Patient Karen Waldstein nominated Francis for the superb care and patience he showed during her stem cell donation procedure. In her nomination, Waldstein said she was excited – and anxious – when she learned she was a match to be a stem cell donor for her brother, who was newly diagnosed with leukemia. "I carried a tremendous burden in the outcome," said Waldstein. "The compassionate and skillful support of Don got me through the procedure."

When the procedure was over, Francis was there – staying after hours to ensure that Waldstein was OK. She recalled that, during a subsequent visit to the MGH with her brother, Francis happened to walk by and stopped to ask how they were doing. "He remembered our case, which made us feel that he really cared about us," Waldstein said. "Don made me appreciate the difference one person can make."

Francis is survived by his wife, Anne; two sons, Charles and Marc; four sisters; his father and his father's wife. Services were held May 30 in Ipswich.

Leading the charge in stroke care

"YOU ARE THE poster child for excellence in quality improvement. You are leading the charge at the hospital, city, state and nation," said Elizabeth Mort, MD, senior vice president for MGH Quality and Safety, at the third annual MGH Acute Stroke Breakfast Gala at the MGH Paul S. Russell, MD Museum of Medical History and Innovation.

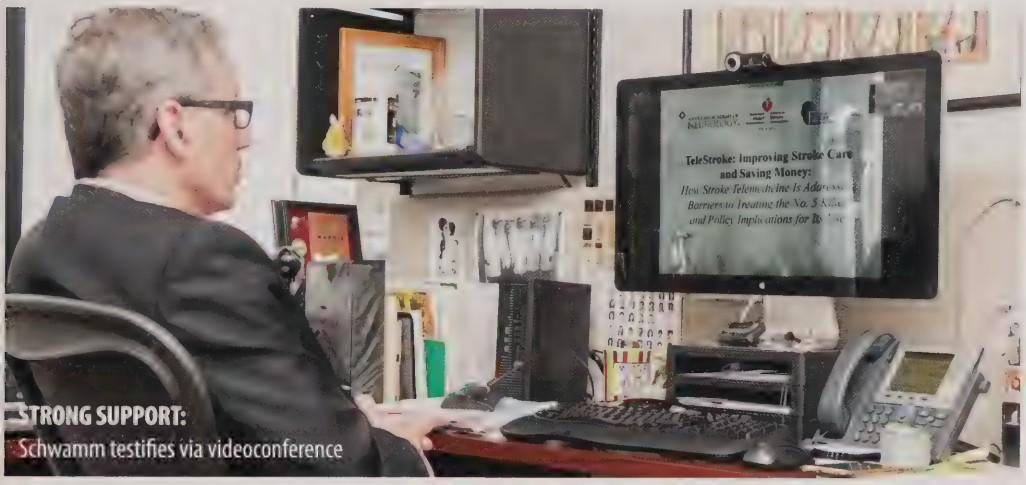
During the May 15 event – held in connection with the American Stroke Awareness Month – the MGH Acute Stroke Quality Taskforce celebrated another successful year of treating acute stroke patients and the exemplary work of its staff.

"It's all about timing," said Natalia Rost, MD, director of the MGH Acute Stroke Service and the Acute Stroke Quality Taskforce. Delivering lifesaving treatment to an acute stroke patient as quickly as possible is absolutely critical, and two key messages – "time is brain" and "every second counts" – are emphasized by the ta
to continue to achieve th
it is of the utmost impor
tissue plasminogen activa
a half hours of stroke on
this "door-to-needle" tim
what is known as the "go
appropriate patients with
the hospital.

In 2014, the MGH not
standard, with a 15-minute
acute stroke patient. The I
exceptional care was hono
every patient outcome, bu
care for every patient and

Testifying in support of TeleStroke

IN THE U.S., someone has a stroke every 40 seconds. Previously there were great barriers to fast treatment and a lack of access to experts; however, the introduction of TeleStroke now enables doctors to diagnose stroke patients located anywhere within minutes, at any time of day, through video, smartphones and other technology. This significantly cuts down on the time between the symptom onset and the moment a patient receives tissue plasminogen activator (tPA), a clot-busting drug that can greatly improve recovery outcomes.



STRONG SUPPORT: Schwamm testifies via videoconference

As the momentum of TeleStroke grows, MGH doctors also are supporting ways to expand this treatment to more patients. On May 20, Lee Schwamm, MD, executive vice chairman of the Department of Neurology and director of Stroke Services and the Partners TeleStroke Network, joined a team of experts to testify via videoconference before the U.S. Senate in support of the Furthering Access to Stroke Telemedicine (FAST) Act, introduced by Sen. Mark Kirk (R-Illinois). As Medicare currently only reimburses TeleStroke diagnoses and treatments for patients located in rural settings, the bill would expand coverage to every potential TeleStroke patient.

"Being able to lay your eyes on a patient and examine the nervous system is a vital part of making this diagnosis correctly," said Schwamm during his testimony. "This is a very time-dependent treatment, and we have to get people treated as quickly as possible. Since we can't bring every patient to a comprehensive stroke center, we've got to figure out how to bring the doctor to the patient, and that is really what TeleStroke is about."

Schwamm said TeleStroke is used when a patient transferred to a regional community hospital with stroke symptoms. The on-call teleneurologist located at a comprehensive stroke care center or larger hospital – such as the MGH – is paged for a consultation, receives and reviews the patient's brain scans through a secure online portal, and returns the page by phone. Depending on the nature of the case, the call may transition to a videoconference. If appropriate, the specialist will conduct a neurological assessment of the patient with the local emergency department physician. The specialist will then document their findings within a TeleNeurology portal and collaborate with the local physicians and the neurologist on the best approach to care.

In 2014, the MGH had a total of 1,202 TeleStroke cases with 542 video consults and 660 phone consults. Out of those cases, 65 percent of patients remained at their community hospitals.

"These are some tough economic times for many hospitals," said Juan Estrada, director of MGH's TeleNeurology Program. "Lack of reimbursement is a major barrier to the development of TeleStroke programs. Our experience at the MGH shows there is tremendous value to the American health care system in the development of TeleStroke networks. We are confident that the proposed reimbursement will increase the rate at which the thousands of hospitals that currently lack around-the-clock stroke coverage adopt TeleStroke as the affordable, effective solution to the problem." ■

ce on a daily basis. In order
patient outcomes, Rost said
o administer intravenous
PA) within three to four and
e MGH aspires to reduce
and, as a result, has achieved
our" standard of providing the
within 60 minutes of arriving at

ttained but exceeded this
to-needle time for one
nber team that provided this
the gala. "We can't control
an control the excellence of
ate the team that delivered the

fastest treatment at the MGH in 2014," said Rost.

Success would not be possible without collaboration and coordination between numerous MGH departments, she added. "We take caring for acute stroke patients very seriously at the MGH and it's not an easy feat. It requires precision and coordinated care from a multidisciplinary team who work as a well-oiled machine 24/7, 365 days a year."

The efforts of another 13-member team that saved patient Anand Murthy's life also were recognized at the event. In 2014, Murthy suffered from an acute stroke as a result of basilar artery thrombosis and was transferred to the MGH, where the tPA door-to-needle time was 30 minutes. tPA was followed by intra-arterial therapy, a mechanical procedure used to further open the artery by removing larger clots. Two

(Continued on page 4)

ROST

Announcements available online
To read this week's "What's Happening" items, visit www.massgeneral.org/news/hotline

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

CONTRIBUTOR
Mae Driscoll

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

— Research posters

(Continued from page 1)

and they embody the concept that people are our greatest strength."

The day also featured lectures by Leigh Hochberg, MD, PhD, FAAN, FANA, director of the MGH Neurology Neurotechnology Trials Unit, who spoke about trends in biomedical science and technology, and Joanne Kamens, PhD, executive director of the nonprofit plasmid repository Addgene, who spoke about successful research career development.

The annual event celebrates fellows, and aims to provide career development and create a strong network among researchers and their colleagues. "This has been the most wonderful morning we have had in a long time," said Dennis Brown, director of the MGH Office for Research Career Development. "Next year we hope to have twice as many posters."

— Stroke gala

(Continued from page 3)

members of Murthy's clinical team – Scott Silverman, MD, of the Department of Neurology, and James Rabinov, MD, of the Department of Radiology – spoke about his success story. "It was great to restore blood flow and save Mr. Murthy's life," said Rabinov.

Murthy and his family were in attendance at the event, and he expressed his gratitude for the MGH care team. "I received great care here at the MGH. I would like to say thanks to everyone involved."

Rost said stories like Murthy's fuel the success of the MGH Acute Stroke Quality Taskforce and serve as reminders of how vital the work of their members truly is. "We are going to remember your story," Rost told Murthy. "It will stay with us forever."

— Creating hope

(Continued from page 1)

world leader in research and patient care, including genetically targeted cancer therapies.

In his remarks, Daniel A. Haber, MD, PhD, director of the MGH Cancer Center, reflected on the changing tide of cancer treatment. "The rapid pace of discovery is incredible. A patient who might be out of treatment options one day may be eligible for a phase one clinical trial of a new targeted therapy or immune therapy the next month."

POWERFUL PIONEERS:
[illegible], Haber, Foti and Engelman

Also honored was the research team from the lab of Jeffrey Engelman, MD, PhD, which developed ways to culture tumor cells taken from biopsies so they can be tested for sensitivity against nearly 1,500 drugs and drug combinations. The hope is that, with their findings, the best treatment for each patient's cancer can be determined in the lab.

During the event, Jonathan Kraft praised the MGH Cancer Center for its role in changing the standard of care worldwide and reflected on the incredible progress he has seen during his and Patti's tenure as co-chairs. "In five short years, what we have going on today at the Cancer Center is really the future of cancer care all coming together in one place."

Other speakers included Cam Neely, president of the Boston Bruins and the Cam Neely Foundation for Cancer Care; 2015 honoree Margaret Foti, PhD, MD (hc), CEO of the American Association for Cancer Research; David P. Ryan, MD, chief of Hematology/Oncology and clinical director of the Cancer Center; and Stemberg. Musician and 2015 honoree Charlie Scopoletti closed out the evening with a performance of his song, "Beautiful Day." The event's visionary sponsors were DirecTV, Paul and Sandy Edgerley, and The Kraft Group.

Nominations are now open for **the one hundred** 2016. Visit *www.theonehundred.org* for more information. ■

A favorite returns

SAY CHEESE:
Soumya Idrissi Machichi, of MGH Nutrition and Food Services, serves up a slice to a hungry MGHer at the June 2 reopening of the Papa Gino's pizza station at the Eat Street Café. The recently renovated station features new pizza ovens and an upgraded hood system.

06.26.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

EMPLOYEES GATHERED June 24 on the Bulfinch Lawn to celebrate the annual MGH Employee Summer Picnic and join Operation 5,000, a life-size version of the classic children's game Operation. Staff – with the help of Patriots players Matthew Slater, Chris Jones and Rob Gronkowski – operated to remove Cavity Sam's broken heart, funny bone and Adam's apple as part of the My Giving Helps Campaign. The picnic included carnival games, music and a snow-themed photo booth dedicated to the hard work MGHers accomplished during the difficult winter.

Celebrating the 'greatest assets' of the MGH

COMMITTED, SELFLESS AND DRIVEN were just a few of the words used to describe MGH employees in operations support roles during the annual Operations Support Staff Day luncheon under the Bulfinch Tent on June 18.

"Our support staff is the backbone of the MGH," said Jean Elrick, MD, senior vice president for Administration, who welcomed staff and guests to the celebration. "You are the greatest asset of the institution and make the MGH what it is."

The luncheon featured the presentation of the 14th annual Ricardo Diaz Award to Mina Chaibat, who started her career as an Environmental Services aide in the MGH Fertility Center 10 years ago. "I would ask people about their different jobs and I thought, 'Why not me?' I can go to school and grow at the MGH," she said.

Chaibat followed her desire to grow as a professional by utilizing MGH's English for Speakers of Other Languages Program and tuition reimbursement benefit, ultimately earning a new position as a pharmacy technician in the MGH Pharmacy Department. "It is a privilege for me to work at the MGH in any department," Chaibat says. "I will always do my best to do great."

This year 46 employees were nominated for the Ricardo Diaz Award, which is named in honor of a Buildings and Grounds employee who died in an accident while plowing snow at the hospital in 2003.

SUPPORTING STAFF: Chaibat with Elrick

Honoring a beloved physician

TWO YEARS AGO, the MassGeneral Hospital *for* Children (MGH*f*C) lost a beloved physician, Jordan Ruboy, MD, a pediatrician associated with the hospital for more than 50 years.

"I had the honor to know and work with Jordan for 40 years, and he was a model pediatrician," said Ronald E. Kleinman, MD, physician-in-chief of MGH*f*C. "Many knew him as a warm, fun, colorful and caring friend. I and those lucky enough to work with him shared that same experience but also knew him as a skilled and sensitive caregiver, teacher, mentor and confidante."

Much has been done to honor Ruboy's memory and his passion for pediatric medicine. Most recently more than 70 people attended a June 1 reception at the MGH Paul S. Russell, MD Museum of Medical History and Innovation to celebrate the creation of the Jordan S. Ruboy, MD, Endowed Fund for Compassionate Care. This fund was established with a gift from Ruboy's spouse, Richard Milstein, Esq., to provide education in compassionate care through a series of lectures for MGH clinicians who strive to continue Ruboy's work by providing high-quality care for pediatric patients. The fund also aims to help and support patients, their caregivers and family members.

"These opportunities are a chance to build the skills that people look for in a physician, that are modeled by experienced physicians like Jordan Ruboy, but now can be more formally presented and passed along," said Shannon Scott-Vernaglia, MD, director of the Pediatric Residency Program.

In addition, on June 2 more than 80 attendees gathered for the first Jordan Ruboy Grand Rounds in Compassionate Care in the O'Keeffe Auditorium. Anne C. Brewster, MD, a physician in the Medical Walk-In Unit, was the keynote speaker at the event.

"All these people and places – and future compassionate physicians who will keep alive the memory of Jordan Ruboy – are a source of extraordinary comfort," said Milstein.

FUNDING THE FUTURE: Milstein with Peter Greenspan, MD, vice chair of the Department of Pediatrics

HONORING EXCELLENCE: From left, Anne Young, MD, of the Department of Neurology; Swoboda; Sims; Kevin Stanley, MD, chief of Pediatric Neurology; and Cudkowicz

Swoboda honored with Sims endowed chair

KATHRYN SWOBODA, MD, director of the Neurogenetics Unit within the MGH Center for Human Genetic Research, is the first incumbent of the Katherine B. Sims, MD, Endowed Chair in Neurogenetics.

On May 7, Swoboda was honored at a ceremony at the Paul S. Russell, MD Museum of Medical History and Innovation. Merit Cudkowicz, MD, chair of the Department of Neurology, kicked off the reception by welcoming a crowd of more than 100 guests, describing Swoboda's expertise in the field of neurogenetics in addition to her skill in discovering disease and pushing forward novel ways to develop treatments for these disorders.

> "Kathryn is already a leading investigator in neurogenetics with a special focus on spinal muscular atrophy. We are very excited to welcome her to the MGH and to support her and her team in their efforts to help our patients with neurogenetic disorders."
>
> — Merit Cudkowicz, MD

"As the first incumbent of the Katherine Sims Chair, Kathryn brings her experience in genetics and clinical trials to lead our efforts for treatment and care of people and families with genetic causes of neurological disorders," Cudkowicz said. "Kathryn is already a leading investigator in neurogenetics with a special focus on spinal muscular atrophy. We are very excited to welcome her to the MGH and to support her and her team in their efforts to help our patients with neurogenetic disorders."

Swoboda completed her residency in neurology at Brigham and Women's Hospital, followed by a fellowship in genetics at Boston Children's Hospital. From 1998 to 2014 she served in several positions at the University of Utah School of Medicine in Salt Lake City, including assistant professor in the Department of Neurology, and adjunct assistant professor in the Division of Neurology in the Department of Pediatrics.

Swoboda said being honored with a chair named for Sims is especially gratifying given Sims' immense impact on neurogenetics. "Kathie is the first medical detective who won't give up, and the most fun part about accepting this position is getting the chance to overlap with Kathie. I really jumped at the chance," Swoboda said. "I'm so excited to build on Kathie's legacy and I'll try to make it grow and make it even better – if that's possible." ■

Honoring patients as teachers

CARLA TRODELLA smiled for pictures, arm-in-arm with her resident physician, as a recipient of the "Patient as Teacher Award," which the Stoeckle Center for Primary Care Innovation sponsored during the third annual MGH Department of Medicine Awards Ceremony. Her parents stood nearby beaming with pride.

"I always wanted to be a teacher but never became one. My wife has a degree in physical education, but she decided not to teach. I encouraged my oldest daughter, and now she teaches seventh grade. But, I have to say, Carla is the greatest teacher of all. She teaches us determination every day," said Tom Trodella, Carla's father. "I thought I was tough, but she has me beat."

Trodella was one of three MGH patients honored for their role as exceptional teachers to internal medicine residents in the primary care clinic setting. The June 10 ceremony in the Potts Conference Room was created to formally recognize and celebrate the resident physician and patient relationship as part of the larger MGH Residency Training Program's Annual Teaching Award Presentation.

Laura Myers, MD, who nominated Trodella for the award, said Trodella does not let spina bifida hold her back from living independently, driving her own car and actively advocating for more handicap accessibility. "Carla is very focused on always doing her best and then doing better," said Myers. "She has taught me to face adversity through creative solutions – like training for her bicycle races – and even inspired me to bike the Pan-Mass Challenge this summer."

During the event, Jakub Sroubek, MD, PhD, who honored his patient Maryann Harty, recalled when she walked into her first appointment. "She said, 'I'm an enigma and you need to figure me out,'" he said. "And I can attest to that, she has a complex case, but she maintains high spirits despite what she has been through and walks into my office with a smile on her face. I don't know how she does it."

Tiffany Lu, MD, remembers first meeting her patient, honoree Edward Anderson. She had prepared an agenda for the meeting, but Anderson surprised her by bringing his own. "Ed's insightful questions forced me to be very thoughtful about his care plan, which we formulated together," said Lu. "It's really an honor to care for Ed." ■

MGH patient pays it forward

ED INGALLS, 57, a portfolio manager in a downtown Boston investment firm, spent his time outside of the office as an avid sportsman. When he collapsed in cardiac arrest outside the Langham Hotel on July 16, 2014, his family was stunned. "I have always admired my dad as a go-getter. Just one week before his heart event, he hiked Mount Katahdin by himself and Mount Washington with friends. I've always been inspired to stay in shape because of his excellent health habits, and those paid off in the end," says daughter Abi.

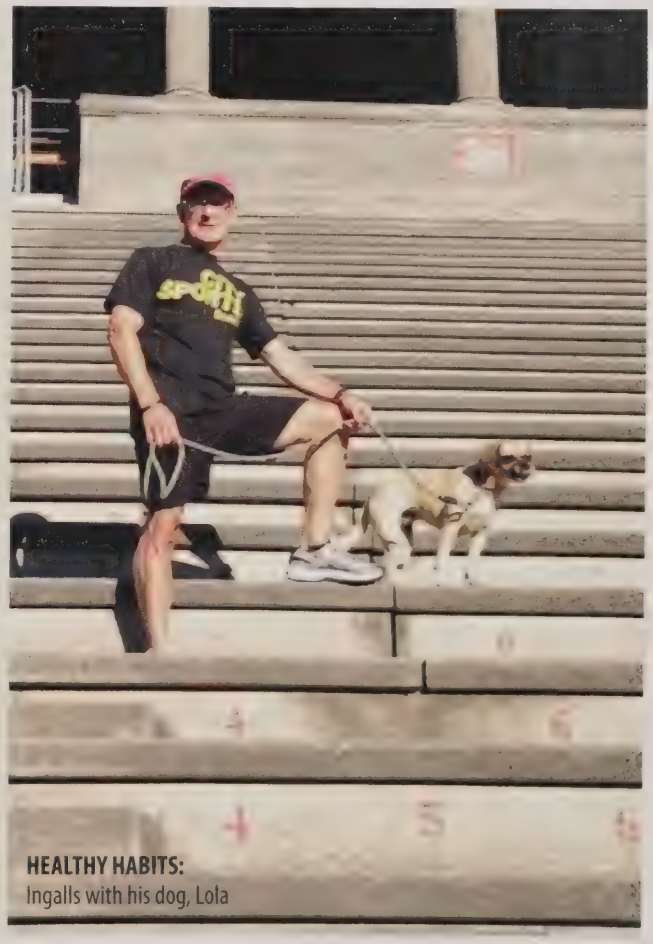
A bystander and several hotel employees quickly came to Ingall's aid, calling 911, beginning lifesaving compressions and using the hotel's automated external defibrillator (AED). Boston EMS rushed Ingalls to the MGH, where it was determined he had suffered from a myocardial infarction due to a blocked coronary artery. During his recovery, Ingalls soon became restless with the regimen set by his physician, Ik-Kyung Jang, MD, PhD, of the Corrigan Minehan Heart Center, and asked his daughter, "When can I do a few squats?"

Jang says, "Ed was extremely motivated from the beginning. I think that being a very active person and having gone through such a horrible experience gave him a strong motivation and unique perspective."

Ingalls wasn't the only one motivated by the near-death experience. John Morte and TJ Moon tracked down the family hoping to hear positive news about the unconscious man to whom they administered CPR for more than 10 minutes. "Bystander CPR, which was properly delivered, made a huge difference in the outcome," says Jang.

Becoming fast friends, Morte, Moon and the Ingalls now are heart health advocates, promoting CPR certification and AED placement in public places. "I have become certified and am prepared to pay it forward in someone else's time of need," says Ingalls. "From a type of heart attack commonly known as 'the widow-maker,' I was given a chance at survival as a result of Samaritan intervention; a chance that the staff at the

(Continued on page 4)



HEALTHY HABITS:
Ingalls with his dog, Lola

06.26.15

MGH HOTLINE

Visiting Day sheds light on mental illness

SEEKING TO SHED LIGHT on mental health issues and reduce the stigma that surrounds mental illness, nearly 120 physicians, patients, families and supporters gathered June 8 for the fourth annual Visiting Day event, hosted by the MGH Leadership Council for Psychiatry.

Britain Nicholson, MD, chief medical officer, welcomed attendees and emphasized the importance of integrating mental health care across the hospital. "Our mental health partnerships extend throughout the hospital – in cardiology, in transplant and other surgeries, endocrinology and oncology," he said. "As chief medical officer, I am committed to creating ever stronger connections with our colleagues in mental health."

As an example of the hospitalwide commitment to mental health, Nicholson pointed to the MGH's major initiative to "address the scourge of addiction" as part of its 10-year strategic plan. "We now treat addiction like other chronic diseases such as diabetes or heart disease," he said, noting that the MGH screens and treats people with substance use disorders in the hospital and connects them with outpatient services once they leave.

Jerrold Rosenbaum, MD, MGH psychiatrist-in-chief, described the importance of doctors building a trusting relationship with their patients before treatment can be truly effective. "The patients want to know the doctor cares before they care what the doctor knows," he said. "We use all the craft, art, tools and treatments available to us to establish trust with our patients."

Rosenbaum introduced a panel of speakers at an innovative session called "Stories of Recovery." Three patients, paired with their MGH psychiatrists, told their stories about recovery from addiction, depression and the challenges of taking care of a spouse with dementia.

STRONG CONNECTIONS: From left, MGH Leadership Council for Psychiatry co-chairs Carroll Carpenter and Michele Kessler; Nicholson; Patty Ribakoff; and Rosenbaum

One speaker who is recovering from years of addiction to opiate drugs discussed the pain and shame of his relapses into drug addiction. Even harder than coping with the physical dependence on the drugs, he said, was the mental addiction. "It was almost like having another being inside me."

His treatment with Eugene Beresin, MD, executive director of the Clay Center for Young Healthy Minds, led to his recovery although he said he knows that staying sober is a lifelong effort.

Patty Ribakoff, co-chair of the MGH Philanthropy Program, captured the spirit of the event when she read a passage from her essay, "If These Walls Could Talk."

"If these walls could touch, they would embrace the scores of patients that have passed through these doors, carrying a multitude of ailments. They would touch the shoulders of patients here now and for generations to come and say 'You are safe because every resource available for your care, bar none, is here.'" ■

— CPR

(Continued from page 3)

MGH was then able to turn into the reality of survival and recovery." To date, they have inspired nearly 50 people to become trained and have encouraged the purchase of four AEDs for local workplaces.

The combination of immediate, proper CPR delivery, Ingalls' previous top physical condition and the expert care he received at the MGH was a recipe for success. He now is back enjoying an active lifestyle. "The emergency care at the MGH, recovery in intensive care and the step-down unit were second to none. Constant monitoring, empathetic bedside manner and deep medical knowledge contributed to the overall experience that likely would not have been found at another hospital. I can't begin to express my thanks in words. Being at a top-notch hospital during a life-threatening situation is exactly where you need to be and I am grateful, once again, to have been in the right place at the right time," he says.

The MGH Norman Knight Nursing Center for Clinical and Professional Development will host a series of training sessions this summer for nonclinical staff to become CPR-certified. Email *kpcs@partners.org* for more information.

Hotline print schedule
MGH Hotline has altered its print schedule for the summer. It will be printed every other week from now through Sept. 18. The next edition of *Hotline* will be available on July 10. For more information, email *hotline@partners.org*.

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

CONTRIBUTOR
Mae Driscoll

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

07.10.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

A look behind the lens

LIPI ROY, MD, MPH, a primary care physician in the MGH Department of Medicine, has not only a knack for patient care but a passion for photography as well. Last year Roy used her creativity to compile a photoessay of 20 images portraying the lives of homeless men and women in Boston.

The project, "Capturing the Humanity in Homeless Persons: A Photoessay," aims to tell the stories of those struggling to survive in Boston, and during a reception on June 10 at the Massachusetts State House, Roy was honored for her work.

ROY

"I'm a big advocate of using art to tell stories, to educate the public, and most importantly, as a form of therapy," Roy says. "When this opportunity came along I thought, 'Let me do this for the Boston homeless community,' which includes many folks who get treated at the MGH."

Roy's project was funded by the MGH Winickoff Primary Care fellowship program, which provides practicing physicians with a chance to engage in creative projects outside of their everyday practice and aims to enhance their professional life and development, while contributing to the primary care community. As part of the program, participants spend one half-day per week for three months working on a

(Continued on page 2)

MGH tackles public health crisis

SARA MACCHIANO, MS, MBA, RN

IN APRIL, the state Department of Public Health released data showing that opioid overdoses and deaths are increasing at an alarming rate: the number of opioid-related deaths in 2014 – approximately 1,000 – was 33 percent higher than two years ago and the most ever recorded in Massachusetts. Every county in the state experienced at least one opioid-related death, and a few eastern Massachusetts counties, such as Middlesex and Essex, saw significant spikes. Thousands of opioid overdoses result in emergency room visits and hospital stays and cause immeasurable suffering for families throughout New England.

The MGH is on the front lines of the opioid epidemic. In October 2014, as a result of a community health needs assessment, the hospital developed a new approach to the treatment of substance use disorders, including opioid use disorders. The MGH Substance Use Disorders (SUDs) program goal is to have substance use disorders addressed along all levels of health impact – from primary community-based prevention, to early intervention and treatment, to chronic disease management and recovery support.

"This program represents an exciting and monumental shift in how we think about and take care of patients with substance use disorder. Addiction is a chronic medical disease, and we are working to match our clinical approach with what the science has shown us works. This requires not just new models of care but fundamentally an effort to combat stigma and change culture," says Sarah Wakeman, MD, medical director for Substance Use Disorders.

Coinciding with the 20th anniversary of its community benefits program, and as part of its strategic plan, the MGH has added recovery coaches to its health centers to address opioid and other substance use disorders. Marking the first time the hospital has sought to care for and follow these patients over the long term, the SUDs program seamlessly connects

(Continued on page 3)

IN MEMORIAM

Ned Cassem

EDWIN "NED" CASSEM, SJ, MD, who worked at the MGH for 40 years, died July 4 at the age of 80. Cassem – a highly respected physician who served as chief of Psychiatry from 1989 to 2000 – was also an ordained Jesuit priest.

"Ned was a gifted, extraordinary physician with a brilliant mind who always strove for excellence, whether in his academic accomplishments or clinical practice," MGH Psychiatry leaders said in a letter to staff. "He was enormously generous, offering mentorship and counsel to countless members of the hospital community. The MGH was dear to Ned. It was his workplace but it was also his home and his parish."

Cassem is credited with helping to bring the Psychiatry Department to clinical preeminence, including consistent ratings at the top of the *US News & World Report.* In addition, in 1973 Cassem established the MGH's Optimum Care Committee – one of the first in the nation – which addresses difficult questions about end-of-life care and provides a forum for clinicians, ethicists and legal counsel to discuss clinical challenges. This committee was one Cassem was extremely proud to be a part of and it remains a vitally important resource at the hospital to this day. It is especially fitting that the committee's six guiding principles are values that he held dear and lived his life by: honesty, transparency, equal opportunity, safety, commitment and self-awareness.

"It worked above all because we trusted him," says W. Gerald Austen, MD, surgeon-in-chief emeritus, about the creation of the committee. "Ned was empathetic, humane and at the same time very sensible."

Born in Omaha on Jan. 24, 1935, Cassem attended the Society at St. Stanislaus Seminary and completed the required course of studies at St. Stanislaus, Saint Louis University, and Weston Jesuit School of Theology. During that same time, he earned a master's degree in psychology, attended Marquette University for pre-med studies, and graduated from Harvard Medical School in 1966. He was ordained a priest in 1970.

During his career, Cassem also served as leader and member of many professional organizations – American Psychosomatic Society, Academy of Psychosomatic Medicine, American College of Physicians, Society of Critical Care Medicine, American Psychiatric Association – and on multiple occasions, these and other organizations recognized his commitment to the field with awards and honors.

Colleagues say they will remember his bellowing laugh, his bright smile and the warm welcome he offered to everyone he encountered. His legacy will live on in a number of ways, including an HMS endowed chair in his name.

A funeral Mass will be held at 10 am on July 11 at St. Peter Claver Church in West Hartford, Connecticut and a memorial Mass is scheduled for 10 am on July 17 in the Chapel at Campion Center, 319 Concord Road, in Weston, Massachusetts.

SUPPO[illegible]TEM: From left, Claflin, Mitchell, back row; Eddy, Jeffrey, Fung, and Lubitz

Claflin Awards celebrate innovation

HAVING HONORED 99 WOMEN to date, the Claflin Distinguished Scholar Award recognizes the efforts of female researchers with the dual responsibility of advancing their careers and caring for children. On June 28 in the Thier Conference Room, the 2015 awardees joined senior leadership and Claflin Scholar alumnae for a luncheon hosted by the MGH Office for Women's Careers.

"This is a special awards program providing bridge funding to women faculty to help them sustain their research productivity during childbearing years," said Nancy Rigotti, MD, director of the Office for Women's Careers. "It's a wonderful expression of the MGH commitment to our faculty at an important point in their careers."

This year's awards were presented to Kamryn Eddy, PhD, of the Department of Psychiatry; Vicki Fung, PhD, of the Mongan Institute for Health Policy; Kate Jeffrey, PhD, of the Gastrointestinal Unit; Carrie Lubitz, MD, MPH, of the Surgical Oncology Division; and Caroline Mitchell, MD, MPH, of the Obstetrics and Gynecology Service.

"I think most women can appreciate the struggle of balancing motherhood during this critical stage in our careers. It's great to have this type of support," said Kate Jeffrey, PhD, a principal investigator in the Gastrointestinal Unit in the MGH Department of Medicine, who presented a brief overview of her research on Crohn's disease to the audience.

Established in 1997, the Claflin Distinguished Scholar Award recognizes the work of Jane Claflin, a trustee, benefactor and advocate for the support of women at the MGH. Her work led to the creation of the Women in Academic Medicine Committee in 1993, which laid the foundation for the establishment of MGH Office for Women's Careers in 1997. ■

— *Behind the lens*

(Continued from page 1)

project of their choice. During her fellowship, about 100 people between the ages of 21 and 85 who were patients of hers and her colleagues agreed to be photographed. She enlarged and framed 20 of the pictures for display at the State House. Roy's photoessay will be showcased throughout July, followed by an exhibit at the West End Branch of the Boston Public Library in August.

"What I enjoyed most about this project was getting to know the patients, these special men and women, and hearing their stories," says Roy. "The obstacles they have overcome are incredible. They're hard working, diligent, caring and really appreciate the care they receive from nurses, nurse practitioners and doctors at the MGH, shelters and other community organizations."

Drug disposal receptacle installed

TO HELP ADDRESS safe disposal of many pharmaceuticals, the MGH Department of Pharmacy has installed the state's first drug disposal receptacle located in a hospital.

According to the National Survey on Drug Use and Health, nearly one-third of people aged 12 and older who misuse drugs begin by taking a prescription drug obtained from friends or family members. These individuals, particularly teens, often believe these substances are safer than illicit drugs because they are prescribed by a health care professional, dispensed by a pharmacist and accessible within a domestic or suburban setting. Conversely, those who have expired medications often think the best option for disposal is to flush them down the toilet.

"Our goal is to dispose of these medications in a cost-effective and environmentally friendly way," says Karen Ryle, MS, RPh, associate chief of Pharmacy for Ambulatory Care. "The new receptacle is for patients who have prescriptions they no longer need, which may have expired or are no longer part of their treatment."

The blue receptacle can be found just outside the Outpatient Pharmacy on Wang 2. Items that can be deposited include prescription medications, sample medications, inhalers, ointments and patches. Ryle says the new receptacle will not accept needles, sharps, thermometers, bloody or infectious waste or aerosol cans.

"By bringing their prescriptions to us for safe disposal, patients don't have worry about them ending up in a landfill, in the water supply – or worse," says Ryle.

— *Epidemic*

(Continued from page 1)

Partners community health centers, hospitals, community-based treatment providers and recovery services to identify and support these individuals.

Sara Macchiano, MS, MBA, RN, adds, "Care discontinuity for SUD patients can create a barrier to treatment. We are creating opportunities to assess risk behaviors early and connect patients to resources at every point of contact with an MGH clinician. For example, MGH nurses assess every hospitalized adult for substance use, creating a teachable moment and allowing the individual earlier access to an addiction specialist."

To learn more about MGH's approach to substance use treatment, visit *http://bit.ly/1IoWeU3.* ■

Communities turn out to support safe drug disposal

EARLIER THIS MONTH, MGH Center for Community Health Improvement staff members volunteered to help local neighborhoods safely dispose of unused prescription drugs during two "Take Back" prescription drug disposal days.

The goal of the events is to raise awareness about dangerous drugs in home medicine cabinets, and how to remove them safely. In collaboration with Revere Police, the city of Revere, and the Jack Satter House, a senior living facility – the Revere CARES Coalition hosted its annual event collecting 20 pounds of prescription medication for proper disposal. Mayor Dan Rizzo spoke to attendees about the importance of monitoring prescriptions at home, as the opioid epidemic continues in Massachusetts.

In addition, at the sixth annual event in Charlestown – hosted by the Charlestown Substance Abuse Coalition, the Charlestown Chamber of Commerce and Boston Police – 955 vials of prescription medication and 78 vials of narcotic medications were collected for safe disposal. In 2014, 740 vials were collected, up from 600 collected in 2013. During the event, Karen Ryle, RPh, associate chief of Pharmacy for Ambulatory Care at the MGH, conducted nasal naloxone (Narcan) trainings to demonstrate how to properly use the intranasal spray to quickly reverse the effects of an opiate overdose. ■

07.10.15

MGH HOTLINE

HEARTACHE AND HOPE: On June 23, the MGH Center for Global Health hosted a seminar featuring members of the hospital community who volunteered to assist victims of the earthquakes in Nepal. Panel members shared stories and insights into working during and following the disaster. The speakers included, from left, Hasmukh Patel; Jackie Nally, RN; Bijay Acharya, MD; Renee Salas, MD; and Nicholas Merry, RN.

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

CONTRIBUTOR
Mae Driscoll

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Patient advocacy at the State House

RESIDENTS AND FELLOWS from pediatric residency programs throughout the state joined in an effort to advocate for children during the 10th annual Residents and Fellows Day at the Massachusetts State House. This year's June 10 event was organized by MassGeneral Hospital *for* Children (MGH*f*C) residents Rachel Sagor, MD; Michael Epstein, MD; Molly Wolf, MD; and Aisha James, MD.

Since its inception, the event has allowed residents and fellows to express their support for 27 bills, many of which have been passed and are current Massachusetts law. This year, the group advocated for improving earned income tax credit for working families, securing funding for rapid pediatric psychiatric consultation in the primary care setting, and improving regulation of and limiting underage access to electronic cigarettes.

The keynote address was given by James M. Perrin, MD, FAAP, associate chair of the MGH*f*C Center for Child and Adolescent Health Policy and immediate past president of the American Academy of Pediatrics. The residents also received lobbying and advocacy training from experts in the field, as well as briefings about the bills by area medical professionals, before meeting with representatives to discuss them. ■

65 years at the MGH and a lifetime of achievement

THE MGH DIVISION OF GASTROENTEROLOGY and the MGH Cancer Center recently honored Kurt J. Isselbacher, MD, on the occasion of his 90th birthday and in recognition of his long and distinguished career as a physician and innovative scientist and his leadership of these two programs.

The June 26 festivities included a symposium about gastroenterology and cancer research featuring renowned scientists in both fields. Lectures were chaired by Anil Rustgi, MD, chief of Gastroenterology at the University of Pennsylvania, and Daniel A. Haber, MD, PhD, director of the MGH Cancer Center, and featured speakers from throughout the U.S.

Isselbacher was first at the MGH from 1950 to 1953 for his residency, before working for three years as a clinical investigator at the National Institutes of Health. In 1956, he returned to the MGH as head of the Gastroenterology Unit and focused his research on the mechanisms involved in the intestinal uptake and transport of sugars, amino acids and lipids. Over the next 30 years, his division became one of the leading centers for training, research and treatment of gastrointestinal diseases in the country.

PHOTO COURTESY OF JULIA BRIGHT PHOTOGRAPHY

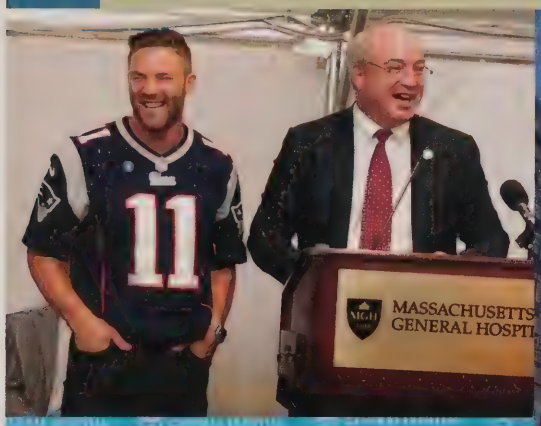
In 1987, the MGH Board of Trustees created the Cancer Center and challenged Isselbacher to be its founding director. His vision, steadfast pursuit of excellence and his ability to attract the most talented and highly motivated clinicians and scientists have led to the creation of a superb enterprise focused on cancer research.

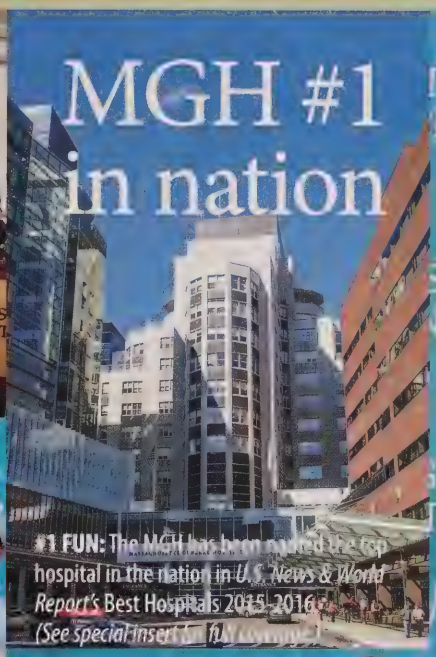
Isselbacher continues to work daily at the MGH Cancer Center as director emeritus, where he is involved in basic science research and faculty development. ■

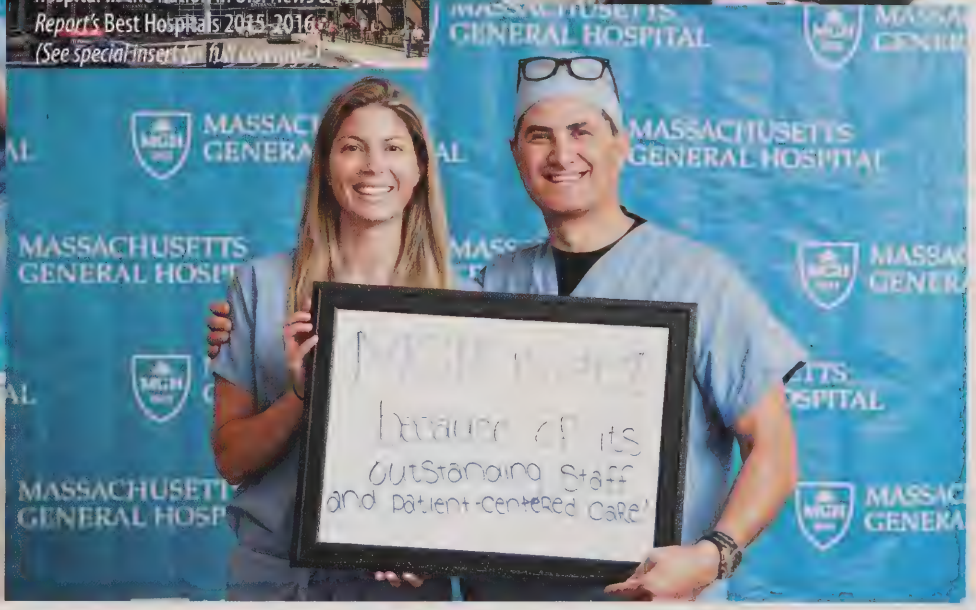
07.24.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL




MGH #1
in nation
#1 FUN: The MGH has been named the top
hospital in the nation in U.S. News & World
Report's Best Hospitals 2015-2016.
(See Special Insert for full coverage)



Thomas Lynch Jr., MD, named MGPO CEO and chairman

FOLLOWING A NATIONAL SEARCH, Thomas J. Lynch Jr., MD, has been selected as the new CEO and chairman of the Massachusetts General Physicians Organization, effective Sept. 1.

For the past six years, Lynch has served as director of the Yale Cancer Center, physician-in-chief of Smilow Cancer Hospital at Yale-New Haven, and the Richard Sackler and Jonathan Sackler Professor of Medicine at Yale School of Medicine. He is credited with bringing a clear vision, strong leadership and expanded depth and scope to these organizations.

Lynch has a long history with the MGH and, as a native of Boston, is no stranger to the community here. Prior to his time at Yale, he served as chief of Hematology-Oncology at the MGH Cancer Center and director of the Center for Thoracic Cancers. He first came to the MGH in 1986 as an intern in medicine and completed his residency here. Lynch then was a fellow in medical oncology at Dana Farber Cancer Institute.

(Continued on page 4)

LYNCH

IN MEMORIAM

Lisbeth Rodríguez

LISBETH RODRÍGUEZ, CMI, a Spanish medical interpreter at the MGH, died June 20 at the age of 46. The MGH community, the patients and families she so faithfully served and her family in Medical Interpreter Services will miss her profoundly.

Rodríguez began working at the MGH in 2009, and her colleagues remember her as a stalwart advocate for patients and families as she sought to play a key role in helping deliver the safest and highest quality of care. Rodríguez had a vision for improving the community and for educating Latinos and other individuals and became an active member of the Committee for Latino Initiatives.

Her colleagues say that Rodríguez spoke of living in a community where peace, sharing and caring for each other were the common value; and in her strong but quiet manner she did her best to live by those values. Her passion for alternative medicine and caring for the body and mind are lessons that will forever be with the spirits of all who knew her.

"While we still recover from the shock of her death there remains an emptiness in our hearts," says Anabela Nunes, MBA, director of Interpreter Services. "However, the shining light of Lisbeth's life will be the legacy that she leaves behind. She touched the lives of so many people who now go forth inspired by her example to fashion a community based on justice, peace, respect for one another and a strong spirit and depth of character."

A funeral service has been held.

GLOBAL OUTREACH: The MGH team in Haiti

Planning a return to Haiti

IN SEPTEMBER 2014, vascular technologists Elizabeth Christiansen, RVT, Corinne Payette, RVT, and vascular medicine fellow Jessica Mintz, MD, traveled to Haiti to teach physicians how to perform lifesaving ultrasound exams in their native environment. The team, selected for a grant through the Fireman Vascular Center, visited the country's central plateau, where they conducted training courses at the Hinche Hospital and Hôpital Universitaire de Mirebalais, teaching more than 10 clinicians to perform specialized ultrasound exams that determine if a patient is suffering from deep vein thrombosis in the legs. Attendees received hands-on training in administering and interpreting ultrasound exams, and heard medical lectures before taking written and practical exams for certification.

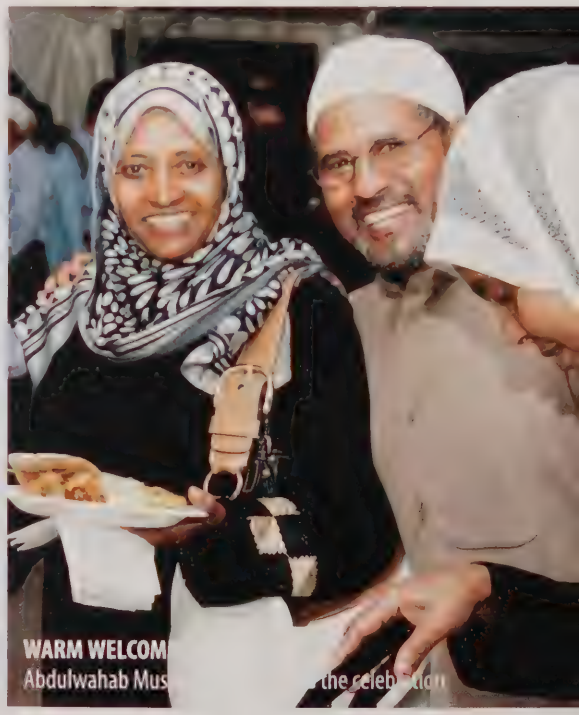
"Through this experience, we have learned so much more about the dire conditions in Haiti. I've been struck with a full realization of how lucky we are to have access to the equipment and medication we have here in the U.S.," says Payette.

Thanks to the success of the course, nearly one year later, Christiansen, Payette and Mintz hope to return to Haiti with a more extensive course outline within the next six months.

While the prevalence of deep vein thrombosis in Haiti is currently unknown, treatment options are currently available, making further diagnosis and treatment – and the education provided by the MGH – a lifesaving resource. ■

Breaking fast encourages community

DURING THE HOLY MONTH of Ramadan, Muslims abstain from food and drink from sunup to sundown. On July 1 at sunset, 150 members of the MGH community broke fast together in a celebration known as Iftar. Attendees gathered in the Thier Conference Room to educate and celebrate with friends, family and patients during the 15th annual prayer and meal. Firdosh Pathan, RPh, of MGH Pharmacy, welcomed the group with a meal provided by the Department of Nutrition and Food Services.



WARM WELCOM Abdulwahab Mus… …the celeb…ion

MGH is #1

EXTRAORDINARY. COURAGEOUS. OUTSTANDING. POWERHOUSE. PROUD.

These were just a handful of the words repeatedly used to describe the MGH and its staff on July 21, as employees, supporters, public officials and honored guests gathered in the Bulfinch tent to celebrate the news that the MGH ranked #1 in the nation on the *U.S. News & World Report* 2015-2016 Best Hospitals list. The report recognized the MGH in all 16 of the specialties ranked by *U.S. News & World Report,* the only hospital in the country to receive this honor *(see sidebar for more information on the rankings).*

The heat and humidity of the day did not deter attendees, and MGHers packed the Bulfinch tent to formally celebrate the announcement. Speaking at the event were Peter L. Slavin, MD, MGH president; David F. Torchiana, MD, president and CEO of Partners HealthCare; Henri Termeer, MGH/MGPO Board of Trustees; Jeff Flier, MD, dean of Harvard Medical School; Stanley Rosenberg, Mass Senate President; Robert DeLeo, Speaker of the Mass House of Representatives; and Greg Pauly, MGPO acting CEO and chairman.

To the excitement of all in attendance, one final special guest appeared as well. Running into the tent and tossing a football to Slavin was New England Patriot Julian Edelman.

"It seems only suitable for the #1 champions of football to present to the world champions of hospitals," Edelman said, as he presented Slavin with a special game ball on behalf of the Patriots and the Kraft family. "We're just here to say congratulations to your team. It's an unbelievable accomplishment."

After the ceremony, smiling and excited employees gathered on the patio to enjoy further celebratory festivities. "We are, because you are" commemorative cookies were handed out. MGHers lined up for some fun at the two photo booths, posing with MGH #1 foam fingers, a 6-foot tall "1", and white boards with their responses to "MGH is #1 because ..." and "I love MGH because ..."

"Thank you for all that you do day in and day out," said Slavin. "I'm proud to call myself an MGHer and I'm proud to work with such wonderful people. Congratulations to the #1 staff at the #1 hospital." ■

CHAMPIONS:
Slavin with Edelman

The MGH's specialty rankings for this year are:

Cancer	8
Cardiology and Heart Surgery	5
Diabetes and Endocrinology	2
Ear, Nose and Throat (with Massachusetts Eye and Ear Infirmary)	1
Gastroenterology and GI Surgery	3
Geriatrics	4
Gynecology	4
Nephrology	6
Neurology and Neurosurgery	2
Ophthalmology (with Massachusetts Eye and Ear Infirmary)	4
Orthopedics	4
Psychiatry	2
Pulmonology	4
Rehabilitation (with Spaulding Rehabilitation Hospital)	6
Rheumatology	6
Urology	16

THE MGH has been named the top hospital in the nation in *U.S. News & World Report's* Best Hospitals 2015-2016 survey. Of the nearly 5,000 hospitals evaluated, the MGH has consistently placed among the top hospitals on the Honor Roll since the survey began in 1990. This year, the MGH is ranked #1 in the United States.

The MGH's sister institution, Brigham and Women's Hospital, ranked sixth this year, making Boston once again home to two of the nation's top 10 hospitals. In addition, the MGH's placement in several areas – ear, nose and throat, ophthalmology, and rehabilitation – reflects its affiliations with Spaulding Rehabilitation Hospital and Massachusetts Eye and Ear Infirmary (MEEI). The MEEI/MGH Ear, Nose and Throat program also was named the top in the nation.

Earlier this year the MGH also was recognized in the *U.S. News & World Report* Best Hospitals for Common Care ratings. The MGH was rated as high performing in all five common procedures and conditions. Fewer than 50 of the more than 4,500 hospitals that were evaluated received a high performing rating in all five procedures and conditions.

A detailed list of the Best Hospitals rankings, including the methodology used by *U.S. News & World Report,* is available at *www.usnews.com/besthospitals.*

We are, because you are

COMPASSIONATE
Outstanding
Innovative
Caring
Transformative
DIVERSE
COLLABORATIVE
DEDICATED
Specialized
SUPPORTIVE
Trustworthy
Ground-breaking
Pioneering
Focused
Brave
Committed
Nice
Safe
Friendly
DRIVEN
Charitable
Resourceful
Accessible
Motivated
Gentle
KIND
LOVING
Experienced
Thoughtful
Forward-thinking
Welcoming
Cutting-edge
Efficient
Team-based
Inspiring
Smart
Helpful
GENEROUS
Warm
COURAGEOUS
Considerate
Connected
PROFESSIONAL
Insightful
Bold
SELFLESS
UPLIFTING
OUTSTANDING
Healing
Wise
KNOWLEDGEABLE

BEST HOSPITALS
U.S.News & WORLD REPORT
HONOR ROLL
2015-16

The MGH is designated the top hospital in the nation by *U.S. News & World Report's* Best Hospitals 2015-2016 survey.

'Understanding Alzheimer's'

TO ADDRESS the challenges of family members caring for loved ones with Alzheimer's disease, Lisa Genova, PhD, a neuroscientist and *New York Times* bestselling author of "Still Alice," visited the MGH on June 16 to discuss her journey into the world of Alzheimer's and what she learned from the experience. Hosted by the MGH Geriatric Medicine Service, the lecture, "Still Alice: Understanding Alzheimer's," was attended by more than 200 MGH staff, patients and community members.

STAYING CONNECTED Moscowitz, Genova and Cornelia Cremens, MD, of Senior Health

"We need to learn how to better live with this, to stay connected to our loved ones who have this, and to care for them in the best way possible while they're living with this disease," Genova says. "To bury our heads in the sand and pretend like it doesn't exist isn't going to solve any problems. There are millions of people living with this disease, and we need to know how to understand it with our hearts, not just our heads, and not to ignore it."

"Still Alice" depicts the life of a Harvard University psychology professor and world-renowned expert in linguistics who is diagnosed with Alzheimer's disease at age 50. The novel – which was translated into 31 languages and has sold more than 2 million copies in the United States – explores how the tragic diagnosis changes the protagonist's life. The book gained immense success shortly after it was published and was recently adapted into a film starring Julianne Moore, who received many awards for her role, including an Academy Award.

When Genova was conducting research for "Still Alice," she needed to find out what living with Alzheimer's looked like. She joined online support groups for those who have been diagnosed with Alzheimer's and ultimately followed the lives of 27 patients. This enabled Genova to tell the story of this disease through the eyes of someone diagnosed with it.

"I found it extraordinary to see how Dr. Genova captured the hearts and minds of the audience by helping us understand the core elements of Alzheimer's disease while also transforming the neuroscience into the reality of living with the challenges," says Barbara Moscowitz, MSW, LICSW, director of MGH Senior HealthWISE and program coordinator of Geriatric Social Work. "She unified the audience of caregivers, patients and clinicians and encouraged all of us to begin the important conversation about Alzheimer's." ■

Two honored with young investigator award

THE FOURTH ANNUAL Herman K. "Chip" Gold, MD, MGH Young Investigator Award presentation was held on June 23 in the Trustees Room. The award, given to honor the legacy of the former director of the Cardiac Catheterization Laboratory, recognizes excellence in clinical or translational research by an interventional fellow in the MGH Cardiology Division.

This year, because of the excellent field of candidates, two honorees were selected. Andreas Mauer, MD, of the Interventional Cardiology Program, was honored for his study, "Genetic Associations with Abdominal Aortic Calcification," and Stephen W. Waldo, MD, of the Vascular Medicine Program, received the award for his study, "Association Between Public Reporting of Outcomes With Procedural Management and Mortality for Patients With Acute Myocardial Infarction." Waldo has joined the faculty at the University of Colorado, so his mentor, Robert W. Yeh, MD, co-director of the MGH Chronic Total Occlusion Intervention Program, accepted the award on his behalf.

Said Michael A. Fifer, MD, director of the Cardiac Catheterization Laboratory, "Today, we are celebrating Chip's contributions to medical science. Perhaps more importantly, we are encouraging future generations of clinician scientists to seek the training and make the commitment to advance cardiovascular medicine."

HONORING EXCELLENCE From left, Fifer; Gold's daughter Lisa Gold; Gold's wife Barbara Nath, MD; Andreas Mauer, MD; and Anthony Rosenzweig, MD

07.24.15

MGH HOTLINE

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

ASSISTANT EDITOR
Colleen Keilty
617-724-2753

CONTRIBUTOR
Mae Driscoll

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
50 Staniford Street
Suite 830
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find *MGH Hotline* on the web at *www.massgeneral.org/news/hotline* or by scanning the QR code above.

— *Lynch*

(Continued from page 1)

He joined the MGH professional staff full time in 1993, and in 2008 was named a full professor of Medicine at Harvard Medical School.

"The MGH is truly a special place," said Lynch. "The talent, compassion and commitment of the medical staff are unmatched. Caring for the patient in the best way we know how is the core value of the hospital and has been since its founding in 1811. While change in health care is inevitable, I can think of no better place in the country to define excellence in patient care, education and research than the MGH."

In his 23 years at the MGH, Lynch focused his practice and research on lung cancer. He was an integral member of the MGH team that in 2004 made the discovery that specific genetic mutations in patients with lung cancer explained why certain therapies worked for some patients and not for others. This was among the earliest studies in the evolution of the field of targeted therapy, offering new hope of treatments and cures to patients.

Among his many distinguished roles, Lynch has been a member of the Schwartz Center for Compassionate Care Board of Directors since its founding in 1995, chairing the board from 2009 to 2011. The Schwartz Center was created from the vision of Boston health care attorney Kenneth Schwartz, who in his final days of life envisioned an organization that would foster compassion and nurture the patient-caregiver relationship. Diagnosed at age 40 with advanced lung cancer, Schwartz was cared for at the MGH and was inspired by the extraordinary compassion and humanity of his MGH team, which was led by Lynch.

Lynch succeeds David F. Torchiana, MD, who stepped down in March to become CEO and president of Partners HealthCare. A committee of nine members, chaired by Katrina Armstrong, MD, MGH physician-in-chief, worked to find the best candidate for the role.

Camp, crafts and laughs

ARTIST AT WORK: Nicole Schindler, 10, gets creative on July 15 as the Hole in the Wall Gang Camp's Hospital Outreach Program (HOP) sponsored the second annual Camp Day – bringing magic and inspiring imagination to MassGeneral Hospital *for* Children patients and their families. HOP was a recipient of the MGH Cancer Center's **the one hundred** honor in 2014 for its commitment to bringing the spirit of camp to children and families year round. The day's events included archery, fishing, spin art and an ice-themed experiment hosted by the Boston Museum of Science's STEAM Team that encouraged creativity, learning and fun.

A special week for siblings

MESSAGES OF LOVE: The Pediatric Oncology clinic on Yawkey 8B recently hosted "Sibling Week" to honor the brothers and sisters of children being treated for cancer. As part of the festivities, attendees participated in a magical day with "Frozen's" Elsa, who shared stories, dance and crafts and attended art and music programs. Here Junaraliz "Juni" Adamez, 4, enjoys a visit with Lizzy, a fiberglass great white shark from the Atlantic White Shark Conservancy. The week also featured a caricature artist, a family photography session hosted by Flashes of Hope, and a pizza party. Gift bags including a #1 Sibling medal and T-shirts were given to each of the patients to give to their siblings. Children made cards with messages for their brothers and sisters, and parents were given opportunities to write about their pride and love for their children. Sibling Week is hosted by Social Work and Child Life in Pediatric Oncology and funded with the support of the Friends of the MGH Cancer Center.

08.07.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

#EVERYAUGUSTUNTILACURE: On July 31, Merit Cudkowicz, MD, chief of Neurology, joined fellow clinicians, researchers and the daughter of an ALS patient, in the annual ALS Ice Bucket Challenge. The event, which raises money for research in ALS, launched in August of 2014 and has since sent waves through the nation. In honor of the challenge's one-year anniversary, the Neurology Department kicked it up a notch and not only dumped buckets of ice cold water over their heads, but then plunged into The Clubs at Charles River Park pool in their scrubs.

Troulis named new chief for Department of Oral and Maxillofacial Surgery

MARIA J. TROULIS, DDS, MSC, currently the acting director of the Skeletal Biology Research Laboratory, has been named the next chief of the MGH Department of Oral and Maxillofacial Surgery (OMFS). She also will serve as the next Walter C. Guralnick Professor and chair of Oral and Maxillofacial Surgery at Harvard School of Dental Medicine (HSDM). These appointments became effective Aug. 1.

"I am thrilled to be starting this new chapter in the department of OMFS at the MGH," says Troulis. "I hope to make a difference and serve the field, my department and the MGH well. I am very fortunate to have inherited such a great department in this great hospital."

Troulis earned her master's degree and doctorate of dental surgery from McGill University in Canada. She then completed her residencies at Royal Victoria Hospital and Montreal General Hospital before coming to

(Continued on page 3)

TROULIS

The history of health care and a look ahead

THE MGH LEADERSHIP ACADEMY recently hosted its eighth annual Spring Lecture, welcoming a familiar face back to the MGH. David F. Torchiana, MD, former chairman and CEO of the MGPO, who now serves as president and CEO of Partners HealthCare, served as the keynote speaker.

Torchiana's lecture included a history of health care and health care reform and the challenges that face the MGH and Partners today. During his lecture, "Partners HealthCare: Challenges and Opportunities Ahead," Torchiana proposed potential strategies to improve patient care while focusing on increasing cost effectiveness. "If we work to understand the forces that are shaping our environment, we can also work to influence them and affect our own destiny," he said.

> "If we work to understand the forces that are shaping our environment, we can also work to influence them and affect our own destiny."
>
> — David F. Torchiana, MD

The MGH Leadership Academy celebrated a milestone this year, marking a decade since it was established. "The annual lecture supports the mission of the Leadership Academy – to establish standards of competencies for management and provide the opportunities for managers to develop those competencies," said Carlyene Prince-Erickson, director of Employee Education and Leadership Development. "Ten years ago we started with nine courses and have grown to 32 courses. Seventy-five percent of current managers have taken at least one course."

For more information about the MGH Leadership Academy, visit *http://www2.massgeneral.org/leadershipacademy/index.htm.*

CARDIO AND COMMUNITY: Members of the MGH Running Club gather before a run.

Weekly runs with the MGH Running Club

IT'S TIME TO lace up those sneakers and hit the pavement with fellow colleagues. The MGH Running Club is back up and running.

The club, a part of PHS Running Partners, is steadily growing in numbers since it re-formed in June. Starting out with just three people, the group has grown to double-digit participation.

"It's just a fun and relaxed way for people of all running levels and experience to get out and be active a couple of times a week," says Alexandra Bukowski, clinical research coordinator at the MGH-Avon Breast Cancer Research Group.

Bukowski stresses that the group is for runners of all levels, and anyone can join for a run at any time, even if they are just starting out. "You will never have to worry that you are slowing the group down," says Bukowski. "Everyone is welcome, whether you are just starting to run or training for a race. We have people at all levels that come out and run together."

The group starts out along the esplanade where they enjoy beautiful views along the Charles River. Some run to particular bridges, which mark different distances, but people can break off and turn around at any point.

For anyone who wants to join the group for a run, the club meets Mondays and Thursdays at 5:30 pm on the pavilion outside of Yawkey, directly across from the Charles/MGH T stop.

"My hope is to create a cohesive community of employees who wouldn't otherwise know each other," says Bukowski. "Everyone will have a buddy while running, and at the end of their runs I hope people find they've both made a friend and gotten great exercise."

For anyone with further questions, check out the running club website at *https://mghrunningclub.wordpress.com,* or contact Allie Bukowski at *abukowski@partners.org.* ■

Running for a Cause

ON SATURDAY, JULY 25, the Red Sox Foundation and MGH Home Base Program held the sixth annual Run to Home Base presented by New Balance at Fenway Park. This year's event included more than 2,300 runners and walkers, 300 of which were active service members. The event raised more than $1.5 million for the Home Base Program, bringing the 6-year total to nearly $13 million.

"Each day an average of 22 veterans commit suicide, an unfathomable number that points to the greater need for post-service care in the veteran community," says U.S. Army Brig. Gen. (ret.) Jack Hammond, executive director of the Home Base Program. "That's why it's so important to have events like the run, which helps to not only celebrate the brave men and women who serve, but also draws in those who may be suffering the invisible wounds of war in the form of post-traumatic stress disorder (PTSD) or traumatic brain injury (TBI)."

Along with Hammond, top representatives from each branch of the military; MGH President Peter Slavin, MD; Medal of Honor Recipient Staff Sgt. Ryan Pitts; Boston Mayor Marty Walsh; Gov. Charlie Baker; U.S. Congressmen Seth Moulton and Joe Kennedy; Red Sox Chairman Tom Werner; and New Balance President and CEO Robert DeMartini attended the event.

During the opening ceremonies attendees heard the stirring personal story of U.S. Army Sgt. John Girouard, who shared his struggles with PTSD and TBI after being severely wounded when his unit came under attack while in the Middle East. Following his return to civilian life, Girouard sought help at the Home Base Program, and eventually continued to give back to his community as a firefighter with the Fitchburg Fire Department.

"It has been so exciting to see the Run to Home Base grow each year, and not just in its fundraising efforts. The awareness we raise and connections we make at events like this truly help save lives. It's not easy to seek out care, but no one deserves to suffer alone," continues Hammond. "We always say that their mission is complete, but ours at the Home Base program has just begun."

The successful run builds on what has already been a busy year for the Home Base Program, as it was recently designated a Center of Excellence for the Wounded Warrior Project's Warrior Care Network, a national recognition that will help the program expand its treatment for those suffering from PTSD and TBIs in New England. ■

AND THEY'RE OFF: Runners set out on Yawkey Way.

— New chief

(Continued from page 1)

the MGH as a clinical and research fellow in Pediatric Craniomaxillofacial Surgery in 1997. She has remained part of the MGH community ever since.

During her career she has changed the face of clinical OMFS by pioneering the use of minimally invasive surgical techniques, both distraction osteogenesis and endoscopic procedures. Her work in this area has paved the way for what has become the rapidly growing use of minimally invasive alternatives for the reconstruction of the jaw. Troulis also refined the minimally invasive approach of endoscopic management of salivary duct stones, sparing many patients from invasive surgical procedures.

Among her many roles, Troulis serves on the MGH Executive Committee on Teaching and Education, as well as the newly formed Graduate Medical Education Committee and is a member of the Partners Education Committee and its Subcommittee of Evaluation and Feedback. Troulis teaches at Harvard Medical School, HSDM and the Harvard-MIT Health, Sciences and Technology program. Since 2005, she has directed the Harvard-OMFS Residency Program and during the past decade has transformed it into one of the most preeminent programs in the country. Her love and enthusiasm for teaching earned her Harvard's Clifford Barger Award for Excellence in Mentoring in 2008, and the Harvard School of Dental Medicine Distinguished Senior Faculty Award in 2010.

Troulis succeeds Leonard B. Kaban, MD, DMD, who since 1994 has served as chief of OMFS at the MGH and as the Guralnick Professor and chair of Oral and Maxillofacial Surgery at HSDM. Kaban will remain active in the clinic and lab.

08.07.15

MGH HOTLINE

Announcements available online
To read this week's "What's Happening" items, visit www.massgeneral.org/news/hotline

Submit news tips and story ideas to *MGH Hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

ASSISTANT EDITOR
Colleen Kelly
617-724-2753

CONTRIBUTOR
Mae Driscoll

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
125 Nashua Street
Suite 220
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

Find MGH Hotline on the web at www.massgeneral.org/news/hotline or by scanning the QR code above.

MGH launches new violence prevention video

THE MGH DEPARTMENT OF POLICE, SECURITY AND OUTSIDE SERVICES has created a new educational video to help staff identify and respond to potential incidents of workplace conflict and violence.

"Unfortunately, incidents of workplace violence are higher in health care given the open access, tension and populations posing risks that we see," says Bonnie Michelman, director of MGH Police, Security and Outside Services. "Research shows that effective intervention can have a positive impact and successfully de-escalate a potentially volatile situation."

CALL TO ACTION: Employees address violence prevention in video.

The video, "Workplace Conflict: Violence Prevention," shows scenarios employees may see in their everyday work. Each vignette depicts what not to do when a situation occurs, followed by an explanation of what staff can do to better handle the conflict.

"Being able to witness an incident taking place helps employees understand the significant impact their attitude, behavior and "paralanguage" – speech intonation, pitch, speed, hesitation noises and facial expression – has on their daily interactions with every member of the MGH community," says Michelman.

The video can be accessed by clicking the Partners Quick Start > HealthStream > Catalog > MGH Police and Security > MGH PHS Workplace Conflict, Violence Prevention. Although viewing the training video is not mandatory, Michelman strongly recommends that all staff watch and learn in the interest of safety. "Our new video provides critical information to help all employees, regardless of job level or title, respond appropriately to conflict and violence at the MGH."

MGH celebrates commitment to community and equity

THE MGH'S CENTER FOR COMMUNITY HEALTH IMPROVEMENT (CCHI) and the Disparities Solutions Center (DSC) recently celebrated 20 and 10 years respectively of addressing healthy communities and health care equity at the MGH. Both centers exemplify the MGH's nationally-recognized leadership in efforts to reduce health care disparities and to improve the health of the local communities the hospital serves.

Supporters and guest speakers at the June 4 ceremony included, from left, Joseph Betancourt, MD, MPH, director of the DSC; Peter L. Slavin, MD, MGH president; Boston Mayor Marty Walsh; Victoria Reggie Kennedy, attorney and wife of the late Sen. Edward M. Kennedy; Garth Graham, MD, MPH, president of the Aetna Foundation and former deputy assistant secretary at the U.S. Department of Health and Human Services; Joan Quinlan, vice president for community health and founding director of CCHI and Nicole Bourgeois, a recovery coach at the MGH.

VOL. 51 NO. 30

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

EXCITING EXPERIENCE: From left, Tracy Stanley, Kristina Aiello, Tracey Benner, Qing Wai Wong, all of MGH Youth Programs

Youth explore careers in health care

SUMMER MARKS a time of year when many departments, research labs and health centers throughout the MGH experience an energy burst and an excitement that young people bring to the hospital as part of the MGH Summer Jobs program.

More than 200 high school and college students worked this summer in 54 locations throughout the hospital, and community health centers in Charlestown, Chelsea and Revere. In addition to their jobs, many students participated in new learning opportunities through professional development workshops and the Summer Fit Club, which emphasizes fitness and healthy eating.

Zaida Ortega, a practice manager in Neurology, has supervised Summer Job students for more than five years, working with four students this summer. "The students make the Summer Jobs experience exciting for me and for all of us. These students are dedicated to the work with a strong sense of responsibility," Ortega said.

Hajidat Umarova, 16, a Chelsea High School junior, is one of the students who worked with Ortega. "One of the most exciting things I got a chance to experience this summer was to shadow Nurse Practitioner Darlene Sawiki in the ALS Clinic," Umarova said. "I talked to her about what it's like to care for patients who have ALS. I also had the opportunity to meet a patient with ALS and to observe how they dealt with the weight of such a disease, knowing the outcome. This experience helped to awaken a desire to study ALS and help find a possible cure. My shadowship opened my eyes to a new field that I had not considered."

This year Ed Chu, MD, an Internal Medicine resident, co-led a

(Continued on page 2)

My Giving Helps employee campaign launches

THE 2015 MY GIVING HELPS: THE MGH FUND + UNITED WAY employee campaign will launch its annual fundraising drive Sept. 9. The campaign runs until Oct. 2, and co-chairs David Brown, MD, chief of the Department of Emergency Medicine, and Harry Orf, PhD, senior vice president for Research, hope to recruit a record 5,000 employee donors.

This year, there is double the reason to contribute; any new or increased gift to the MGH Fund or United Way will be doubled in full, thanks to five generous donors.

Gifts to the MGH Fund provide unrestricted dollars to support the most promising programs and initiatives at the hospital. Additionally, gifts to United Way provide assistance to more than 170 organizations in the Boston area.

(Continued on page 3)

CAMPAIGN KICKOFF: Members of Team Broken Heart, from left, Donald Ravenelle, Casey Chamberlain, New England Patriot Matthew Slater, Caren Harris, NP, and Rhonda McIntyre, RN, during the campaign's kickoff at the MGH Employee Picnic.

Gallagher family dedicated to improving lives

A COUPLE DEDICATED to improving the lives of others has once again shared their generosity with the MGH community by creating the John R. Gallagher III and Katherine A. Gallagher Endowed Chair in Clinical Nephrology. This is not the first time these longtime supporters and friends of the hospital have extended their support for research and clinical care. In 2012, they also established the John R. Gallagher III and Katherine A. Gallagher Endowed Chair in Gastrointestinal Cancer Research.

"We are very thankful to the Gallaghers for their amazing support over the years," says Peter L. Slavin, MD, MGH president. "Not only are John and Katherine amazing supporters and philanthropists, they also are truly wonderful people that I am honored to call friends."

The Gallaghers are known to many in the MGH community and they also were honored in 2011 at **the one hundred** gala, the Cancer Center's annual event recognizing "Everyday Amazing" individuals who are committed to the fight against cancer. Katherine Gallagher also recently endowed the Katherine A. Gallagher Integrative Therapies Program, which focuses on improving the quality of life and well-being of patients with cancer and their families and friends through free wellness services plus education and support workshops.

In June, Leslie S. T. Fang, MD, PhD, of the Division of Nephrology, was honored as the inaugural incumbent of the endowed position in clinical nephrology, while Nabeel M. Bardeesy, PhD, previously was named to the gastrointestinal cancer research chair.

"I am eternally grateful that John R. Gallagher III and Katherine Gallagher decided to recognize clinical activities as they pertain to the day-to-day care of patients," says Fang. "While clinical activities do not engender earth-shattering discoveries of scientific import, these activities form the backbone upon which all of our other endeavors would be judged. It is my honor to be the incumbent of this esteemed chair and I hope that this position would allow for continuing embracement of clinical excellence."

GENEROUS GIFT:
Fang with John Gallagher

"Save My Life" brings millions inside the MGH

THE ABC MEDICAL DOCUMENTARY SERIES, "Save My Life: Boston Trauma" – which features the MGH, Brigham and Women's Hospital, Boston Medical Center and Boston EMS – has captured the attention of millions of viewers nationwide. With one episode left to air on Sunday, Aug. 30 at 10 pm on ABC, the series has showcased the amazing work of MGH clinicians and the resiliency of patients and their families. The show also has received an overwhelming positive response on social media:

@Salliefrew: #SaveMyLife makes me miss the ER and Trauma

@Kathryn_J_RN: I love this show #SaveMyLife ...gives me a lil of my work adrenaline whe Im home ... the RNs and MDs are #phenomenal

@derekeb: @abctruemedicine It's just heartbreaking to see these two veterans so down and out and using drugs to cope w/ horrors of war. #SaveMyLife

@Team_Giudice: Another must see show on Sunday's is #SaveMyLife on @ABCNetwork great real life show that makes you appreciate all you have!

@taylormadee40: Medicine is absolutely amazing. Re attaching an amputated forearm. Coolest thing ever! #SaveMyLife New medical show, yay!!

@dodiesue: @abctruemedicine Love, love, love this series!!! Boston IS strong! Hoping it comes back again! #SaveMyLife #AllDrsNursesEMTsAreROCKSTARS

@nickiiiak: #SaveMyLife is an INCREDIBLE show! I have so much appreciation for the positive attention nurses are getting. Makes me excited for my future!

@Chelle10camp: @abctruemedicine you have open our eyes to the raw reality our #Veterans are faced with #SaveOurVeterans #SaveMyLife

@laciehisle: I can't get enough of #SaveMyLife makes me even more thankful of all the nurses and doctors that were there for me when I needed them.

Full episodes can be streamed online at: *http://abc.go.com/shows/save-my-life* ■

— *Summer Jobs*

(Continued from page 1)

medicine and health curriculum for fifth and sixth graders enrolled in the Senior STEM Club afterschool program at the Yawkey Boys & Girls Club in Roxbury, which is overseen by MGH Youth Programs. At the program's annual end-of-summer celebration, Chu reflected on his own transitions from high school and medical school, and encouraged students to embrace change even if they did not think the would fit in, even if it felt uncomfortable and even if the journey to achieving thei goal seemed lengthy.

MGH Summer Jobs and the MGH Youth Programs are initiatives spearheaded by the Center for Community Health Improvement at the MGH. ■

The MGH introduces new mobile website

THE MGH'S MOBILE WEBSITE, *m.massgeneral.org,* has been redesigned and relaunched on a new platform with enhanced features. These include expanded content to more broadly communicate major elements of the hospital's mission; improved user experience and search functionality; and clear, action-oriented information to expand patient/physician relationships. Setarreh Massihzadegan, senior manager of Digital and Content Marketing in the MGH Marketing Department, answers questions about the new site.

Q. Why did you upgrade the MGH mobile website?

A. We know more people are accessing health information on their mobile devices. According to Pew Research Center data from 2012 and 2014, 31 percent of cell phone owners and 52 percent of smartphone owners have used their phone to look up health or medical information – up from 17 percent of cell phone owners in 2010. It's essential that we provide a positive user experience for that growing demographic.

Q. What were the goals of the project?

A. The redesign focused on several key features, including:

- Expanding content to more broadly communicate about major elements of our mission.
- Improving and expanding the user experience, including a better search feature.
- Providing clear, useful, action-oriented information to expand the patient/physician relationship, including easy access to patient and physician online portals.

Q. What content is available on the mobile site?

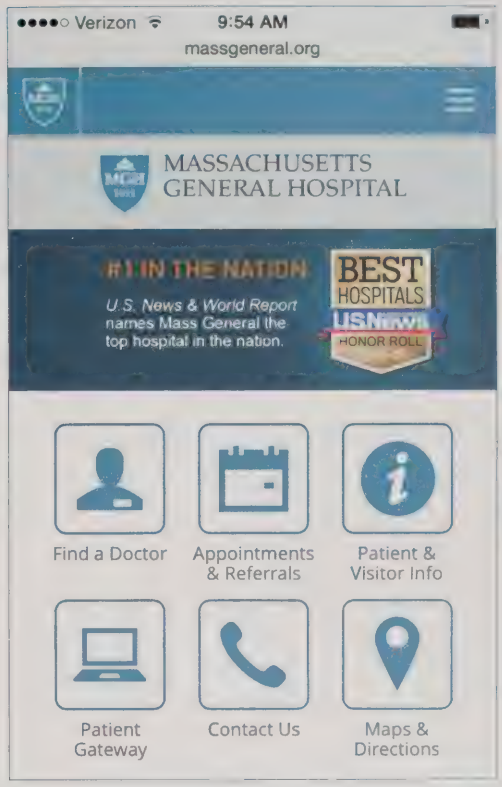
A. The content on the mobile site reflects a limited amount of the content that also lives on *massgeneral.org,* with modifications to optimize for a stronger mobile experience. The mobile site also links to additional resources available on *massgeneral.org* and other important external sites.

The priority content areas for this project include:

- Contact information for clinical departments and centers.
- Maps of hospital buildings, services and amenities.
- Information about research and clinical trials.
- News, social media and videos.
- Details on careers at the hospital.

Q. Will you continue to expand the mobile site?

A. Yes. We plan to add additional content to the mobile site, with a focus on access to expanded clinical information. ■



Cancer Center employee appreciation event

ON JULY 30, MGH faculty and staff gathered under the Bulfinch Tent to celebrate the many contributions of MGH Cancer Center employees and **the one hundred** 2015 honorees. Daniel Haber, MD, PhD, director of the Cancer Center, thanked this year's honorees for their commitment to the fight against cancer and introduced Thomas Spitzer, MD, director of the Bone Marrow Transplant Program a 2015 **the one hundred** honoree. Spitzer expressed his appreciation at being recognized among the many deserving individuals and thanked his colleagues, noting they recently celebrated the incredible feat of performing their 2,000th bone marrow transplant. Nominations for **the one hundred** 2016 are now open at *www.theonehundred.org.* Staff and patients are encouraged to nominate a researcher, caregiver, advocate, volunteer or philanthropist who is changing the way cancer is fought. ■

WORDS OF GRATITUDE: Haber addresses the crowd at the event, expressing appreciation for those who help in the fight against cancer.

— My Giving Helps

(Continued from page 1)

Campaign organizers will host a series of events and giving opportunities throughout September, including:

2015 Kick Off Day – Sept. 9
Kick off the 2015 giving season with a free coffee from Coffee Central or Coffee South. Stop by the My Giving Helps information table to pick up a coffee sleeve which can be redeemed for a complimentary cup o' joe.

United Way Week – Sept. 21-25
Stop by one of the information tables outside the Eat Street Café and help assemble back-to-school backpacks for MGH pediatric patients and other children within the Greater Boston community. Don't forget to pick up a Blue & Orange cookie at a local MGH eatery. A portion of the proceeds from each cookie sale will be donated back to My Giving Helps.

Blue & Orange Week – Sept. 28-Oct. 2
Employees wearing blue and orange who are spotted by a campaign champion will be eligible to receive prizes, including restaurant gift cards and movie tickets.

To learn more about the campaign or to make a donation, visit *www.mygivinghelps.org.*

08.21.15

MGH HOTLINE

Announcements available online
To read this week's "What's Happening" items, visit *www.massgeneral.org/news/hotline*

EDITOR
Colleen Marshall Delaney
617-726-0275

ASSISTANT EDITOR
Colleen Keilty
617-724-2753

CONTRIBUTOR
Mae Driscoll

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
125 Nashua Street
Suite 220
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

Photos by MGH Photography unless otherwise noted.

MGH Hotline is printed on recycled paper.

HUBweek: A celebration of innovation

JOIN THE MGH as it kicks off HUBweek, a weeklong festival of innovation coming to Boston Oct. 3-10. This inaugural festival is designed to enhance Boston's reputation as a center of innovation, learning, medicine, technology and the arts. The MGH will host a series of engaging, thought-provoking, interactive and healing programs that will showcase medical innovations in Boston. *Hotline* will dedicate its next issue to all things HUBweek, so be sure to pick up a copy of the Sept. 4 edition for a closer look at the great events the MGH will offer. Learn more and register for sessions at *www.massgeneral.org/hubweek*

The Boston Globe · Harvard University · MIT Massachusetts Institute of Technology · Massachusetts General Hospital

Learning new life lessons

WHEN THREE MGHERS – Elizabeth West, RNC, nursing practice specialist in the Vincent Obstetrics and Gynecology Department, Naida Cole, MD, anesthesiology resident, and May Pian-Smith, MD, director of Quality and Safety in the Department of Anesthesiology – traveled to China to teach clinicians how to safely decrease cesarean rates, the team did not realize they also would be learning lessons in patient care.

In June, the group visited Jiujang Maternity and Child Health Hospital, southwest of Shanghai, where they conducted a weeklong session as part of the "No Pain Labor and Delivery" global health initiative, training more than 40 clinicians through one-on-one interaction, specialty debriefing sessions, simulations and bedside teaching. The program aims to decrease China's high rate of cesarean sections – which can increase the likelihood of mortality and morbidity.

"The Jiujang team had such a thirst for knowledge and open-mindedness about new care techniques," says Pian-Smith. "In particular, they embraced our recommendations about improving inter-professional communication as a way to improve patient safety. Their ability to adapt was inspiring to us."

Jiujang, which has three times the yearly deliveries of the MGH, is staffed by highly skilled clinicians who were quick to incorporate the group's teaching and guidance into practice. But the Chinese cohort was not the only one gaining knowledge.

"I've returned to Boston with a deeper appreciation for my role as a physician," says Cole. "This experience has broadened my perspective and taught me to question what 'best practice' means in different medical environments. That way I'm always learning."

West agrees, "I've learned that establishing trust is so important. Though we had cultural and language barriers, I'm most proud of our ability to establish trust with the team to accomplish this important training."

In sharing their experience, interest in the mission has grown. Next year, more staff from Nursing, Obstetrics and Anesthesiology are expected to participate. The MGH-China partnership will not only continue to make measurable changes in epidural use, and decrease the cesarean delivery rate, but also will allow the valuable cross-continental lessons to shape its participants. ■

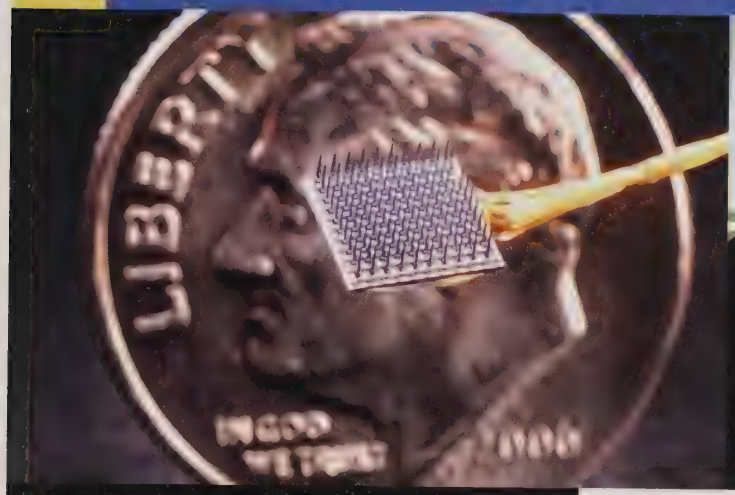
YMCA Summer Achievers learn about Ebola

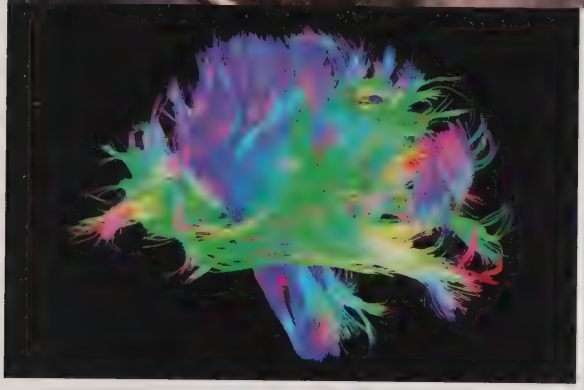
PARTICIPANTS IN THE YMCA Summer Teen Achievers program visited the MGH Aug. 4, as part of a week dedicated to learning about health care. The group of 8th through 10th graders learned about Ebola virus disease preparedness from Kara Mellonakos and Robert Krupa, both of the MGH Emergency Department. As part of the hour-long presentation, the group learned about the personal protective equipment MGH clinicians would wear when interacting with a potential Ebola patient. Participants, including Tyler Themidor, above, had the opportunity to zip into a suit that fully protects the wearer from head to toe. During their visit to the MGH, the group also toured the Paul S. Russell, MD Museum of Medical History and Innovation, and the MGH helipad, dispatch center and emergency department with David Marquez from Police and Security.

09.04.15

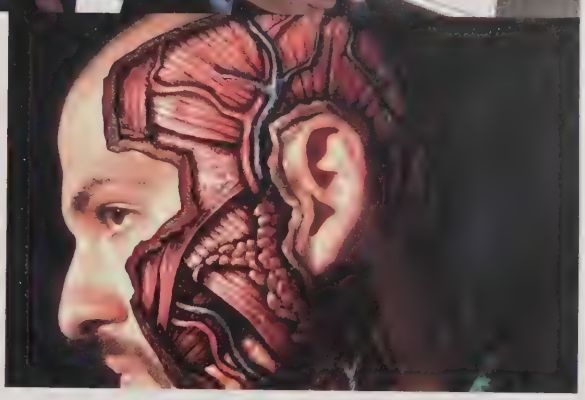
MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL





HUB week
October 3-10, 2015



The Boston Globe · HARVARD UNIVERSITY · Massachusetts Institute of Technology · MASSACHUSETTS GENERAL HOSPITAL

HUBweek: where art, science and technology collide

FINAL PREPARATIONS are underway, and registration is open as the MGH prepares to host Boston's inaugural HUBweek, Oct. 3-10. Throughout the week the MGH will convene clinicians, researchers, policy experts, patients and families to take on some of the toughest health care questions and challenges in cancer, neuroscience and health care delivery – while showcasing significant breakthroughs in life sciences.

A citywide festival, HUBweek is designed to enhance Boston's reputation as a center of innovation, learning, medicine, technology and the arts. The MGH joins Harvard University, Massachusetts Institute of Technology and *The Boston Globe* in presenting HUBweek.

The MGH is honored to host Massachusetts Gov. Charlie Baker as keynote speaker for a daylong session on value-driven health care. Nancy Gertner, JD, Harvard law professor and retired U.S. District Court judge, will lead a discussion with Judith Edersheim, MD, JD, co-director of the MGH Center for Law, Brain and Behavior, on the legal implications of the latest brain science as part of our Women in Medicine evening lecture series at the Paul S. Russell, MD Museum of Medical History and Innovation. WCVB's Kelly Tuthill, a cancer survivor and mother of three, will inspire as our special guest during a provocative session on breast cancer and genetics, and Lisa Genova, author of the award-winning novel *Still Alice* will join leading Alzheimer's experts for a thought-provoking session on breakthroughs in diagnosis and treatment.

These are just a few examples of the engaging and educational MGH-hosted programs, which also will include a mini hack-a-thon on prevention and treatment of opioid addiction; sports concussions in children and adults; the intersection of art and neuroscience; and a giant outdoor relaxation session to help Boston "de-stress." The goal is that all attendees learn something new and join in with a sense of great pride in what Boston has accomplished in the field of health and medicine.

HUBweek programming at the MGH is open to the public and offered free of charge with advance registration required. To register, and to see a full calendar of HUBweek events at the MGH, visit *www.massgeneral.org/hubweek*. To see all the HUBweek activities in Boston, visit *www.HUBweek.org*. ■

A message from the MGH president

BOSTON'S FIRST HUBWEEK is shaping up to be the kind of exciting festival of celebratory, challenging and inspiring public events that we had dared to imagine more than a year ago when the idea of showcasing the innovation, life sciences, culture, education and wonders of Boston was broached. The MGH is both honored and pleased to be one of HUBweek's founding hosts along with Harvard University, Massachusetts Institute of Technology and *The Boston Globe*.

From a lively Fenway Park Forum on emerging ethical issues led by Harvard Professor Michael Sandel, PhD, and featuring well-known writers, entertainers, and local leaders; to a working session as part of Solve MIT on addressing energy needs and sustainable production worldwide; to the GlobeDocs Film Festival; to our own wide-ranging week of health care programming focused on innovations in neuroscience, cancer and care delivery – HUBweek is likely to be an extraordinary experience all around.

On behalf of HUBweek, I encourage everyone to participate and learn, be motivated and inspired, and celebrate the world-changing thinking, energy and work that is Boston.

Peter L. Slavin, MD
MGH President

From Opioids to Alcohol: Designing an Effective Response to Addiction

AT THE MGH, addressing the ongoing opioid epidemic is a hospitalwide priority. As a result, the MGH and our colleagues at Boston Medical Center will convene clinicians, researchers, policy leaders, community members and others for a highly interactive discussion on this regional and national challenge. Specifically, the group will look at how the most recent advances in neuroscience can influence the development of policy, prevention and treatment.

Monday, Oct. 5
8-11 am
Wyndham Hotel
5 Blossom St., Boston

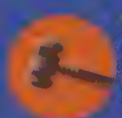
In this mini hack-a-thon, small groups will use a case study to take a fresh look at building prevention, treatment and recovery management approaches that work.

A keynote speaker for the session will be Wilson Compton, MD, MPE, deputy director of the NIH's National Institute on Drug Abuse (NIDA). Compton leads NIDA's research portfolio in the science of prevention and treatment of addiction. Peter L. Slavin, MD, MGH president, and Kate Walsh, Boston Medical Center president and CEO, will offer welcoming remarks. Emcee for the day is Donna Latson Gittens, founder and CEO of More Advertising, a company that has designed more than 300 campaigns to influence attitudes and change behaviors on a variety of public health challenges, including smoking, substance abuse and HIV prevention. ■

Perspectives in Healing: Women in Medicine series

BOSTON IS extremely fortunate to have a number of women physicians, researchers and caregivers who are accomplished leaders in their fields. For five evenings during HUBweek, some of these extraordinary women will offer their unique views on science, health and healing to the greater Boston community, and talk about what motivated them to pursue their professional careers in medicine. Each program will feature a moderated audience conversation that covers personal and professional perspectives on medicine, the law, media, happiness, grief, music as a healing tool and much more. The series is sponsored by the MGH Research Institute and all sessions will be at the Paul S. Russell, MD Museum of Medical History and Innovation.

Sunday, Oct. 4 – Thursday, Oct. 8

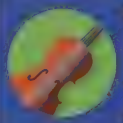


Can Justice be Served When the Newest Brain Science Meets the Law? Sunday, Oct. 4, 6-7 pm
Judith Edersheim, MD, JD, co-director of the MGH Center for Law, Brain and Behavior; Guest moderator: Nancy Gertner, JD, Harvard law professor and former U.S. District Court judge

When Doctors Report the News Monday, Oct. 5, 6:30-7:30 pm
Suzanne Koven, MD, primary care and internal medicine, a medical writer whose work appears regularly in national publications and Mallika Marshall, MD, internal medicine and pediatrics, WBZ-TV's Emmy award-winning medical reporter; Guest moderator: Carey Goldberg, host, WBUR's CommonHealth blog

Driving Ourselves Happy, Tuesday, Oct. 6, 6-7 pm
Nancy Etcoff, PhD, cognitive researcher, instructor of "The Science of Happiness" at Harvard Medical School, and director of the Program in Aesthetics and Well Being at the MGH

Doctor, Patient, Writer: Personal Illness Narratives Wednesday, Oct. 7, 6-7 pm
Alice Weaver Flaherty, MD, neurologist, researcher, educator, and author of *The Midnight Disease*, a personal perspective on the neural basis of creativity



The Healing Arts of Music and Medicine, Thursday, Oct. 8, 6-7 pm
Lisa Wong, MD, pediatrician and author; members of the Longwood Symphony Orchestra; and Lorrie Kubicek, MGH's music therapist

Leading the way in care delivery

ONE OF THE GREATEST CHALLENGES in health care is improving the way we deliver care. During HUBweek, the MGH will host two full-day sessions involving clinicians, administrators, payers and policy leaders from health care systems throughout the country and closer to home.

Innovations in Care Delivery Consortium

AN INVITED GROUP of 50 clinical administrators from Mayo Clinic, Intermountain Health, UPenn, Virginia Mason Medical Center, Mount Sinai and other national health systems will convene to launch the first national consortium designed to improve systemwide health care delivery. The day-long symposium will be hosted by Michael R. Jaff, DO, MGH/MGPO director of Care Redesign, and will feature guest speakers from Harvard Business School, Google Ventures and other corporate leaders.

Tuesday, Oct. 6
8 am-4 pm
Thier Conference Room, by invitation only

"The challenge of improving the process of care delivery, integrating technology, improving efficiency and adding value while keeping the patient in the center of attention is no easy feat," says Jaff. "Participants in this consortium have expertise in many aspects of improving health care delivery, and our goal is to share victories and analyze challenges using novel teaching methods from our colleagues at Harvard Business School." ■

Beyond Technology: The Future of Value-Driven Health Care

"WHEN YOU TALK ABOUT improving health care, many people automatically think about new technology, new mobile devices or apps that claim to revolutionize health care and save money. But during HUBweek, we are taking on a much more difficult assignment, changing the health care delivery system to improve our patients' health, and manage costs in an intelligent way to keep health care affordable," says Tim Ferris, MD, MPH, senior vice president of Population Health Management for Partners HealthCare. Ferris will lead a day-long session that includes providers, payers and policy leaders from Massachusetts, many of whom were involved in building the state's landmark health coverage reform legislation that became the model for the Affordable Care Act. The event's special guest is Massachusetts Gov. Charlie Baker, who will deliver the keynote address. ■

Wednesday, Oct. 7
7:30 am-4 pm
Simches Research Center
Gov. Baker's keynote address is at 1:30 pm

Advances in neuroscience

The Future is Now

IN THE 1997 science fiction thriller "Gattaca," parents predetermine children's lives by designing their genetic makeup. In the "Star Wars" series, Luke Skywalker uses a bionic hand after his own hand is lost in a battle.

What was once science fiction is now medical innovation. Clinical investigators in Boston hospitals and universities are working together to deepen understanding and treatment of brain disorders, disease and injury. MGH's Jordan Smoller, MD, ScD, of the Department of Psychiatry, is exploring the role of nature versus nurture in mental illness. Darin Dougherty, MD, of the Department of Psychiatry, is part of a team – including researchers from Boston University Medical School, MIT, Harvard and Draper Labs – that is studying deep-brain stimulation treatment of psychiatric illness, especially post-traumatic stress disorder. Neurologist Leigh Hochberg, MD, is leading the development of technology that allows patients with severe spinal cord injuries to use thought to control movement.

Thursday, Oct. 8
Noon-2 pm
Paul S. Russell, MD Museum of Medical History and Innovation

Join these experts in a session hosted by Jerrold Rosenbaum, MD, chief of Psychiatry, to understand more about their extraordinary work and hear their predictions about the next big developments in neuroscience.

Beautiful Brain

STATE-OF-THE ART biomedical imaging and technology are allowing doctors and scientists to "see" pain, identify bio-markers for neurological disease, register the effects of addiction on the brain, and discover how the brain is organized, all the while creating images that are as visually arresting as art. The Athinoula A. Martinos Center for Biomedical Imaging – a collaboration of MIT, Harvard and the MGH – is at the center of this work. In addition, a new generation of medical illustrators, such as Danny Quirk, are finding their own path to depicting human anatomy by using body painting and movement to help medical and nursing students understand muscles, tendons and neuro-anatomy. Coming together in the MGH's historic Ether Dome, artist Quirk and Bruce Rosen, MD, PhD, director of the Martinos Center, will provide a special presentation on the intersection of science and art.

Thursday, Oct. 8
3-5 pm
Ether Dome

For patients, families and our community

De-Stress Boston

Sunday, Oct. 4, 11 am-2 pm, Bulfinch Lawn and Tent

Work, school, traffic, relationships – they all create stress in our lives. De-Stress Boston offers an antidote and an opportunity to practice and experience the power of stress reduction techniques to improve health and build resiliency. This free, communitywide session on the Bulfinch lawn will be led by Herbert Benson, MD, a pioneer in Mind Body Medicine and one of the first Western physicians to bring spirituality and healing into medicine. Benson, along with a team of experts from the MGH Benson-Henry Institute for Mind Body Medicine, will lead participants in step-by-step exercises in yoga, tai chi and other stress-reducing techniques. They also will be joined by members of Project Uplift, a mental health and mindfulness awareness project that allows participants to "lift the world" by reducing stress and anxiety.

Cancer: Innovative Breakthroughs and Personal Journeys

Tuesday, Oct. 6, 8:30 am-4 pm, Starr Center Auditorium, 185 Cambridge St., second floor

Boston is acknowledged as a worldwide center for cancer diagnosis and treatment, a field which is being transformed through scientific discovery and life-saving therapy every day. The MGH Cancer Center brings together leading clinicians, researchers, policy leaders and cancer survivors to explore the newest innovations and challenges in cancer diagnosis and treatment in a day of programming that is as relevant for clinical and research professionals as is it for patients and families.

Daniel Haber, MD, PhD, chief of the MGH Cancer Center, will host this event, which features speakers including David Ryan, MD, chief of Hemotology/Oncology, and inspiring stories from cancer survivors and their families, including WCVB's Kelly Tuthill, a breast cancer survivor and mother of three.

Still Alzheimer's

Wednesday, Oct. 7, 10 am-noon, O'Keeffe Auditorium

Alzheimer's disease affects one in nine Americans over age 65. Boston clinical researchers like MGH's Rudy Tanzi, PhD, director of the MGH Genetics and Aging Research Unit, and Bradley Hyman, MD, PhD, director of the Massachusetts Alzheimer's Disease Research Center, stand at the forefront of breakthrough discoveries to advance the understanding and treatment of Alzheimer's. From genetics, to new clinical trials and treatment, to caring for family members at home, the breakthroughs in Alzheimer's are changing the future of how we are all affected by this disease.

Merit Cudkowicz, MD, MSc, chief of MGH Neurology, will host this important conversation featuring special guest, *Still Alice* author Lisa Genova.

Sports Concussion: Boston's Experts Talk Prevention and Treatment

Friday, Oct. 8, 3-5 pm, O'Keeffe Auditorium

Whether you've been knocked out cold during a basketball game or had your "bell rung" while playing soccer, you may be among the 5 to 10 percent of athletes who have sustained a concussion during the past year.

In this session, led by Ross Zafonte, DO, vice president of Medical Affairs at Spaulding Hospital, clinical experts in adult and child concussions and brain injury will discuss what we know about sports concussion in adult and child athletes, explain what happens when the athlete has a history of depression or other psychiatric illness, and take on challenging questions about treatment and return to play. This session also will feature athletes who will talk about their own experience with concussion.

Additional HUBweek highlights

MGH Clinical Research Day
Thursday, Oct. 8, 8 am-noon
Bulfinch tent, O'Keeffe Auditorium
Annual showcase for MGH clinical researchers includes a 300-person poster session and guest speakers about research breakthroughs throughout the MGH.

The MGH Fund Annual Lecture: Ready When Seconds Count
Wednesday, Oct. 7, 6 pm
Liberty Hotel
By invitation only. For more information, call 617-724-6440 or email *mghfund@partners.org*.
Featuring clinical leaders from emergency medicine and trauma

Digital Health Fair
Thursday, Oct. 8, 4-6 pm
Kendall Square Block Party
See how digital tools are transforming health care today, and how technology and medicine are teaming up to revolutionize the health care of tomorrow. The Digital Health Fair is hosted by the MGH Healthcare Transformation Lab.

HUBweek volunteers needed

VOLUNTEERS ARE NEEDED to assist in hosting MGH Hubweek programs between Sunday, Oct. 4 and Friday, Oct. 9. All programs are on the MGH campus. Volunteers are needed for four-hour time blocks: 8 am-noon and noon-4 pm. To volunteer, email *HUBweek@partners.org* and provide your contact information and times you are available.

EDITOR
Colleen Marshall Delaney
617-726-0275

ASSISTANT EDITOR
Colleen Keilty
617-724-2753

EMAIL
Hotline@partners.org

MAIL
Public Affairs Office
125 Nashua Street
Suite 220
Boston, MA 02114

MGH Hotline is published weekly by the MGH Public Affairs Office.

MGH Hotline is printed on recycled paper.

09.18.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

EQUIPPED FOR HEALTH: Amirhosseini demonstrates a CCRP adaptable machine.

WHEELCHAIR SCALES, adaptive exercise machines, specialized call bells. These were just a few of the resources showcased under the Bulfinch Tent Sept. 10 during an event celebrating the success of the many disabilities initiatives the MGH has implemented over the past six years.

Zary Amirhosseini, disability program manager at the MGH, spearheaded the event, and speakers included Peter L. Slavin, MD, MGH president; Lisa Iezzoni, MD, MsC, director of the Mongan Institute for Health Policy; Bill Henning, executive director of Boston Center for Independent Living (BCIL); and Tom Perry, Independent Living Specialist who also is a patient at the MGH.

More than 7,000 patients at the MGH have self-identified as having either a physical, hearing, vision, speech or cognitive disability.

"We've worked extremely hard for the past six years to ensure all patients and employees have equal access to all services within the hospital," said Amirhosseini. "We've accomplished a lot, and I'm very proud to be able to showcase these many improvements here today."

One milestone celebrated was the completion of the Memorandum of Understanding, a partnership created with leaders from BWH, BCIL and the MGH Council on Disabilities to look at access issues that affect the delivery of care for patients and families.

At the MGH, $7 million was spent over the past six years covering four key areas: remediation of architectural barriers; installation of accessible equipment; adoption of policies and procedures that improve access to health care for individuals with disabilities; and training of hospital staff and volunteers. This included installation of automatic

(Continued on page 4)

A positive approach to alopecia

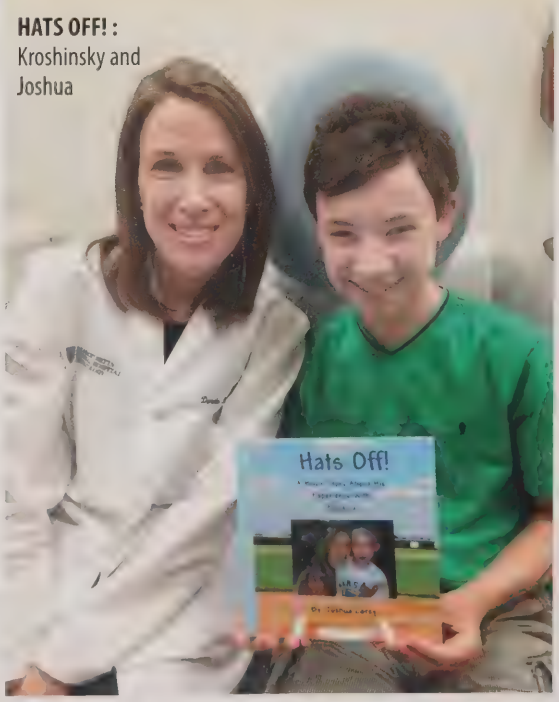
JOSHUA COREY is a typical teenager. When he is not pursuing his love for basketball or preparing for his Bar Mitzvah, the 13-year-old is scrambling to finish his homework and complete chores at home. What is not typical, however, is his mission to empower kids with physical differences, just like him.

Nearly seven years ago, the then 6-year-old Joshua noticed a quarter-sized bald spot on the back of his head. Within five days, he was completely bald. "I thought it was just a bad haircut, but as the hair kept on falling out, I was getting nervous," he says. "No one knew what it was – one doctor told me it was ringworm, another told me it was an infection that would eventually clear up."

After several doctor visits and unsuccessful over-the-counter treatments, Joshua traveled from his home in New Hampshire to meet with Daniela Kroshinsky, MD, director of Pediatric Dermatology at MassGeneral Hospital *for* Children (MGH*f*C). "When I first met Dr. K., I knew something good was going to happen. I remember her telling me that she was not going to quit on me and that made me feel very good – she was a really great coach."

Joshua was eventually diagnosed with alopecia areata, an autoimmune disease that attacks the body's

(Continued on page 2)

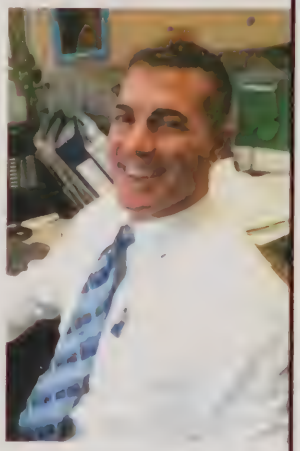


HATS OFF! : Kroshinsky and Joshua

IN MEMORIAM

Frank P. Soldo, III

Frank P. Soldo, III, associate director of the MGH Development Office, died Aug. 11 at the age of 54 after a year-long battle with cancer. Soldo dedicated 25 years of his career to working at Partners HealthCare, the last 15 of which were at the MGH. For many of those years, he was a member of a small team charged with securing philanthropic support for the Department of Psychiatry.



"What we will personally miss the most about Frank are the impromptu knocks on the door when he would appear, broad smile and eye twinkle, to share news of a triumph with a particularly reluctant donor or faculty member," says Carol Taylor, interim vice president for Development. "It was just plain fun to work with him."

His development career began at North Shore Medical Center where he worked for 10 years. His signature accomplishment was helping to create an annual Cancer Walk, which continues to this day. He arrived at the MGH in 2000 and worked initially in planned giving and major gifts.

"Frank's imprint can be found on so many of the fundraising initiatives for the department," says Jerry Rosenbaum, MD, psychiatrist-in-chief. "Whatever the assignment, Frank brought his characteristic enthusiasm, know-how and vitality to bear."

Among the initiatives that Soldo influenced greatly while at the MGH were the launch of the Leadership Council for Psychiatry and fundraising for the Schizophrenia Program, Bipolar Program, Depression Program, Eating Disorders Program, Learning and Emotional Assessment Program, Psychotherapy Endowment and Center for Law, Brain and Behavior. He also helped to plan the department's 75th and 80th Anniversary celebrations, and the Psychiatry Grand Rounds lectureship endowment campaign.

"If Frank ever doubted the depth of respect and admiration he garnered at the MGH, this was dispelled by the myriad of emails, calls, cards and visits he received over the last year, foremost from colleagues, but also from donors and members of the faculty," says Taylor.

Soldo is survived by his parents, Frank and Gloria (Codispoti) Soldo; his brother, Paul and his wife Danielle; and nephews, Tyler, Davis and Logan Soldo. Funeral services have been held.

ENTHUSIASTIC SUPPORT: My Giving Helps Champions, Nikki Resor, Ruth Stokes and Barbara Irby, hand out coupons for free coffee and other promotional items to kick off the My Giving Helps campaign season.

My Giving Helps campaign is underway

MGH EMPLOYEES welcomed a new season of giving Sept. 9, as they enjoyed free coffee as part of the launch of the 2015 My Giving Helps: The MGH Fund + United Way employee campaign. Gifts to the MGH Fund provide unrestricted dollars to support the most promising programs and initiatives at the hospital. Additionally, gifts to United Way provide assistance to more than 170 organizations in the Boston area.

This year, there's double the reason to contribute. Any new or increased gift to the MGH Fund or United Way will be doubled in full, thanks to five generous donors.

My Giving Helps co-chairs David Brown, MD, chief of Emergency Medicine, and Harry Orf, PhD, senior vice president for Research, are working toward an ambitious goal of 5,000 employee donors for this year's campaign. The campaign set fundraising records last year, with more than 4,200 employees committing more than $1 million to benefit the hospital and local community.

Upcoming My Giving Helps events include United Way Week (Sept. 21-25) where staff will have an opportunity to assemble back-to-school backpacks for MGH pediatric patients and other children within the Greater Boston community. Nutrition and Food Services also will sell blue and orange cookies that week, with proceeds benefitting the employee campaign. Staff also can look forward to Blue and Orange Week (Sept. 28-Oct. 2), a spirit week that offers employees a chance to win prizes for wearing campaign colors to show their support

To learn more about the campaign or to make a donation, visit *www.mygivinghelps.org.* ■

— Alopecia

(Continued from page 1)

hair follicles, resulting in hair loss. After a round of oral steroids and a topical chemical treatment, Joshua's hair started to grow back. By the start of the new school year, he had a full head of hair. But that was short-lived, as his hair soon started falling out again, including his eyebrows and eyelashes. "As a mom, it was very difficult not to be able to fix this problem," says Stacey Corey. "Joshua and Dr. Kroshinsky were determined to find a solution and it was important for me to empower Joshua to choose the treatment plan that he felt most comfortable with."

Now, Joshua has recruited the help of his family to write a book chronicling his journey at MGH*f*C. He hopes his book, "Hats Off! A Boy's Story About His Experience with Alopecia," encourages and inspires other kids who may be going through a similar experience. "Everyone has something, this is my something. I want to show other kids who have alopecia – or any other condition – to have more self-confidence," Joshua says. "I know what it feels like to look different and I don't want other kids to feel like they don't have somewhere to turn."

The message of Joshua's book is to stay positive, and Stacey Corey says that is exactly how her son continues to live with his diagnosis. "Joshua has never let his condition keep him from being positive and living a normal life," she says. "But what has impressed me the most is that he has never seen it as being about what is on the outside, and I think that is a message we can all embrace."

The book is available in the MGH Dermatology Department's waiting room, and Joshua and his family also hope to publish more copies to help others.

A focus on refugees: the Benson-Henry Institute SMART program

TO BE AWARE OF the ongoing conflicts within the Middle East, one need only pick up a newspaper or read a news website. As the region suffers from devastating conflict, humanitarian responders are looking into ways refugees – those populations caught in the middle and frequently displaced from their homes and homelands – can be taught to better cope with the traumatic stresses of war.

Zeina Chemali, MD, MPH, director of the Neuropsychiatry Clinics in the departments of Psychiatry and Neurology, recently trained humanitarian field workers caring for Syrian refugees throughout Lebanon in key practices involved in the Benson-Henry Institute's Stress Management and Resiliency Training (SMART) program. Currently, she is focusing on improving the quality of life for refugees in Lebanon and the Lebanese field workers who care for them. Chemali also is the director of the Peace in Medicine initiative and a member of Medical Peace Work, an international network of health care workers who tend to people around the world facing difficult health and humanitarian crises.

CHEMALI

"Being a native of Lebanon, I lived through many wars, including the Civil War that lasted for 15 years and still continues to affect the country as a whole," says Chemali. "Unfortunately, we now have horrendous conflicts displacing populations throughout the Middle East – an issue that requires new ways of treating those who have essentially lost everything and continue to experience traumatic levels of emotional distress."

Born, raised and medically trained in Beirut, Chemali came to the U.S. in the early 1990s to train in neurology and psychiatry, eventually joining the MGH in 2010. As part of the Chester Pierce Global Division of Psychiatry at the MGH, Chemali established the Middle East Desk to infuse new tactics in promoting visibility to crises in the Middle East by building contacts between the Arab world and the MGH community. This is the first time the SMART program has been utilized in Lebanon. Chemali trained at the Benson-Henry Institute, then took the program, adapted it and translated it into Arabic so that it could be given throughout the country. Currently, 120 field workers have been trained and are learning to empathize with the struggles refugees face.

"When you participate in medical peace work, your goal is always to prevent violence, attend to health issues and build peace. Programs like the SMART program teach people to be more empathic toward others. Through that empathy and support, you build resilience, which in turn builds stronger communities," says Chemali. "It is my hope and dream to be able to tell people in the Middle East that there are other people who understand their struggles, and that our respective communities can build a better peaceful world together." ■

A celebration of women in medicine

IN COMMEMORATION OF WOMEN IN MEDICINE MONTH, the MGH Center for Faculty Development's Office for Women's Careers, with support from Human Resources, hosted the annual Women in Medicine Month Reception Sept. 10.

Nancy Rigotti, MD, director of the Office for Women's Careers, offered opening remarks and words of appreciation for the remarkable women faculty. She acknowledged the accomplishments of the MGH female faculty and congratulated those promoted to full professor at Harvard Medical School in the past year, as well as the 2015 recipients of the Claflin Distinguished Scholar Awards. Also honored this year was Celia White Tabor, MD, who was the first female physician-scientist intern in the Department of Internal Medicine at the MGH in 1944.

LEADERSHIP LESSONS: Andrews speaks to guests about her own leadership lessons learned over the years.

The lecture featured guest speaker Nancy Andrews, MD, PhD, dean of Duke University School of Medicine and vice chancellor of Academic Affairs. She was introduced by former Harvard Medical School classmate, Peter L. Slavin, MD, MGH president. Andrews spoke of her time leading up to her becoming dean at Duke, and of the leadership lessons she learned along the way. She offered her insights and unwritten rules for women in leadership, imparting the message to always be true to yourself.

"I didn't start out in my career wanting to be a dean, just to do the best I could and inspire people," said Andrews. "I think the world we all want will have many more women in leadership roles."

LOVE FOR LEARNING: Ziv and Aviram Cohen

Students share discoveries

SWARMING NEUTROPHILS, clumping bile salts and glowing gut granules from a roundworm were a few of the diverse topics presented by 11 undergraduate and medical students who attended the 2015 MassGeneral Hospital *for* Children Digestive Disease Research Program at the Mucosal Immunology and Biology Research Center at the Charlestown Navy Yard.

As part of the annual summer program, the students conducted research projects – associated with cystic fibrosis, shigella, helminth infection, inflammatory diseases and autoimmune disorders – under the guidance of an MGH mentor. "It's great to have the students here for 10 weeks in the summer," said Bryan Hurley, PhD, of the Mucosal Immunology and Biology Research Center, who also serves as the program's director. "They bring an enthusiasm and energy that fills the entire lab."

At an August symposium, the students presented their research, and Richelle Charles, MD, of the MGH Infectious Disease Unit, shared the latest developments in the search for comprehensive diagnostic tools for typhoid fever.

"It's unbelievable what our daughter has been able to learn in this short amount of time," said Aviram Cohen, father of participant Ziv Cohen from Lexington, Mass. "It's a fantastic program." ■

Luncheon celebrates generosity of Phillips Society members

MORE THAN 100 MEMBERS of the hospital's Phillips Society were welcomed by Peter L. Slavin, MD, MGH president, during the group's 10th anniversary luncheon to celebrate their generosity and the profound impact of estate and endowment giving at the MGH.

During the Sept. 9 event, the audience learned more about the newly formed MGH Research Institute from its scientific director Susan Slaugenhaupt, PhD, and Jordan Smoller, MD, ScD, associate chief for Research, in the MGH Department of Psychiatry.

"Great science follows an unpredictable path as we have seen again and again," Slavin said. "The support of Phillips Society members is key to advancing this creative research and innovation."

Emphasizing the profound effect of basic fundamental research on medicine, Slaugenhaupt said MGH clinicians work side-by-side with some of the best scientists in the world. The resulting synergy, she said, means "the treatment you get tomorrow will be better than the treatment you get today."

Smoller discussed his work on genetic predisposition to psychiatric disorders. While acknowledging that both nature and nurture play a role, he looked toward a not-too-distant future when mental illness diagnoses "won't be based only on symptoms but on genetic information."

The Phillips Society is comprised of individuals who have included the MGH in their estate plan, through a will or other planned gift, as well as those who make a lead gift to establish an endowed fund. For more information about the Phillips Society, contact Liz Murphy in the MGH Office of Planned Giving at 617-643-5777. ■

GIVING BACK: From left, [illegible] MD, senior vice president of Administration; Phillips Society members Michael Wenger, [illegible] Redstone; and [illegible] DeSanctis, MD, director of Clinical Cardiology, emeritus

—*Accessible MGH*

(Continued from page 1)

doors; renovated Americans with Disabilities Act compliant bathrooms; lowered counters on information desks; hi/lo adjustable exam tables; wheelchair accessible scales; and patient identification in Epic, the hospital's new electronic medical record. The MGH also is the first hospital in New England to have mobile video phones in inpatient units for deaf patients, allowing people to communicate using American Sign Language and a videophone connection.

Adaptive exercise equipment also was showcased at the event. Cliff Seeto, general manager of The Clubs at Charles River Park (CCRP), worked closely with Amirhosseini to make the gym as user-friendly as possible for everyone.

"We hope that purchasing these machines will benefit not just people with disabilities," says Seeto. "They can be used by seniors and help people after physical therapy to slowly build themselves back up. It allows people to be independent and feel comfortable here. Our staff is very aware of accessibility needs, and they are always willing to help people who come through our doors."

CCRP has eight weight machines that are adaptable for users with physical disabilities. Seats can be moved out of the way for those in wheelchairs to use the machines, and the handlebars are adjustable as well. The CCRP has ramps, recently added a lift for further accessibility and is working to add an adaptable rowing machine.

"The MGH has really stepped up to the plate," said Iezzoni. "It is wonderful to see the strides made here at the MGH to have the hospital truly be an example on how to care for people with disabilities." ■

MASSACHUSETTS GENERAL HOSPITAL
EDITOR: Colleen Mantell Delmas • 617-726-0275 • ASSISTANT EDITOR: Colleen Kelly • 617-724-3753
EMAIL: [illegible] • MAIL: Public Affairs Office • 125 Nashua Street Suite 220 • Boston MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office

09.25.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

SYMBOL OF STRENGTH: As part of her advocacy efforts, Greco participated in a photo shoot showing her scars as symbols of newfound strength.

'You never know how strong you are'

ON JUNE 30, KATE GRECO received the news that she had long been waiting for: "Your scans look great!"

The update – from Erika Meneely, NP, in the Genitourinary Cancers group in the MGH Cancer Center – came 363 days after her first CT scan identified a tumor, which led to a diagnosis of transitional cell carcinoma, grade 3 of 3. Just two weeks before receiving her diagnosis, 31-year-old Greco had accepted an assistant principal position in the Malden Public School system and was busy planning for her new role.

"When I found out I had bladder cancer, all the unknowns were scary. I knew I had to be strong and immediately latched on to the quote, 'You never know how strong you are until being strong is your

(Continued on page 4)

AMMP advances education through scholarships

AFTER GRADUATING from high school, Thaisha Guerrier, now a staff assistant in the Department of Medicine, decided to forego college and enter the workforce so her mother – a single parent of three, who had just put one child through college by herself – would not have to support her and go further into debt. Upon beginning her career at the MGH, however, Guerrier began to think further about advancing her education.

She soon learned about the Association of Multicultural Members of Partners (AMMP) scholarship program and now is set to receive her associate degree in Business Administration from Bunker Hill Community College this spring, debt-free. On Sept. 21, she was honored at the AMMP 2015 Scholarship Awards Ceremony breakfast along with eight fellow recipients: Eric Braun, Ryan Brumit, Beata Borowa-Kitlas, Tirza Martinez, Jessica Odotei, Rozanna Riley, Nilofar Shaikh and Paulina Yennah.

"From the moment I took the picture for my ID badge at the MGH, I have received nothing but support, encouragement and opportunities to advance not only my career but also my education," said Guerrier. "After receiving the AMMP scholarship I was able to focus on maximizing my educational abilities to learn the skills and obtain the information necessary to pass my classes and get my degree."

During the ceremony, Jeff Davis, senior vice president for Human Resources, congratulated the recipients and encouraged them to take advantage of all the resources the hospital has to offer to minimize debt while attending classes.

"Not only did receiving the AMMP scholarship help me out financially, but it also showed me this amazing group of people who not only believed in me but were willing to support me in my journey," said Guerrier. "Though this is not the end of my educational journey, I will say that I couldn't imagine a better start."

AWESOME ACHIEVEMENTS: 2015 Scholarship Award recipients along with AMMP representatives

Taking coordinated care to the next level

DURING THE PAST FOUR YEARS, Partners has developed a number of programs – known as Population Health Management (PHM) – to improve the health of patients, lower costs of care and help to ensure more efficient care. Among them are an Integrated Care Management Program (iCMP), which coordinates treatment for high-risk patients across the continuum of care, and a team-based Patient Centered Medical Home (PCMH) model for primary care that consistently promotes coordinated, comprehensive care for patients.

"We've had considerable success with our initial efforts that center on primary care," says Timothy Ferris, MD, who leads the PHM effort at Partners. "Now we are advancing a range of additional programs, including those focused on specialty, post-acute and palliative care."

Two of these advanced "PHM 2.0" programs are E-Consults and Patient Reported Outcome Measures (PROMS).

The ability to ask specific questions about a diagnosis or treatment plan through the E-Consult platform provides an alternative way for some patients to reach out to their care team and may be faster and more efficient than an in-person visit. If an in-person visit is required, however, this process also can help with the preparation. The program is now live at the MGH in 16 specialty areas.

"For patients who do need an in-person visit with the specialist, important items such as tests, lab work or other work ups can be recommended and conducted prior to the visit," says Alexa Kimball, MD, medical director of the MGPO.

PROMs looks at the outcomes that matter most to patients – symptoms, functional status and quality of life rather than, for example, how many days a patient stayed in the hospital. They are measured through structured questionnaires using tablet computers in clinic waiting rooms and from home via Patient Gateway. PROMs now are being used by more than 20 medical and surgical specialties at more than 50 locations across Partners. Project leaders expect to have collected 75,000 surveys by the end of 2015 and 150,000 by the end of 2016. ■

Watch the new PHM video

TO HELP EXPLAIN Partners' efforts to implement PHM, a brief video was created that describes the background for and overall approach to PHM. The goal is to enhance the patient experience, improve outcomes, make care more affordable and make the work of delivering care more satisfying. To view the video, visit *www.partners.org*.

Partners opens first urgent care center

PARTNERS URGENT CARE – a collaboration between Partners HealthCare and MedSpring Urgent Care – has opened its first standalone urgent care center at 1285 Beacon Street in Brookline. Additional locations in Newton and Watertown are under construction and expected to open later this year.

"Partners Urgent Care will provide convenient and affordable medical care to adults and children older than 12 months at locations in the greater Boston area," says Gregg Meyer, MD, MSc, chief clinical officer for Partners. "These centers join Partners hospitals' existing urgent care sites in ensuring that our patients have access to a variety of ambulatory care sites to best support their clinical needs near their homes or workplaces."

All centers are staffed by physicians and operate under the clinical and quality oversight of Partners HealthCare, the MGH, BWH and MedSpring, ensuring the highest quality of care. The centers offer treatment for routine illnesses and injuries, provide vaccines and conduct sports and camp physicals, all on a walk-in or appointment basis. Occupational health services also are available.

Centers are equipped with digital X-ray and lab equipment and offer special amenities – such as free Wi-Fi, complimentary snacks and beverages, activities for children and in-room televisions. Patients who require follow-up care will be assisted with access to the Partners HealthCare system if requested.

For more information, visit *www.partnersurgentcare.org*.

eCare Corner

A chat with Marcy Bergeron

This is the first in a series of eCare Corner stories MGH Hotline will publish in advance of the clinical launch of Partners eCare at the MGH – a Partnerswide initiative to implement Epic, the electronic health record and administrative system at each hospital and affiliated health care site. The single electronic medical record will allow a patient's health-related information to be shared among authorized clinicians and staff from anywhere within the Partners network.

MARCY BERGERON, RN, director of Nursing and Clinical Operations for Primary Care, recently was named the national winner of the 2015 *Nurse.com* Nursing Excellence GEM Award in the Home, Community and Ambulatory category. Bergeron helped establish the Primary Care Nurse Leader Council – a group of more than two dozen primary care nursing directors – to provide a platform for developing, sharing and disseminating best practices. As co-chair of the council, she was involved in developing standards for primary care nursing, from creating and refining job descriptions to articulating practice protocols.

Bergeron – who also has taken on the role as the organizational readiness lead for the MGH's transition to Partners *e*Care – shares a few key initiatives the hospital is working on to prepare for the clinical cycle go-live and what staff can do to be prepared.

What is organizational readiness?
Organizational readiness is an effort to prepare all areas of the MGH for the transition to Partners *e*Care. Our organizational readiness team has been actively working with many departments to plan activities to help the MGH staff prepare for the changes associated with the Epic transition.

> "Staff can also attend Town Hall meetings, and if they are unable to attend in person, they can watch the online recording. Another great way to stay up-to-date is by viewing webinars and demonstrations on the Partners *e*Care intranet site."
>
> — Marcy Bergeron, RN

What organizational readiness activities are currently taking place at the MGH?
The organizational readiness team is conducting workflow review sessions. These interactive discussions allow staff – whom we call subject matter experts – to identify the major changes that Epic will bring. The MGH has identified 18 workgroups representing departments across the hospital to participate in these workflow review sessions. Senior

leaders have also assigned co-leads for each of the workgroups, who are in the process of working with other key staff to help their areas ensure a successful Epic go-live.

What can all staff be doing now to be informed and prepared for Partners eCare?
They can stay informed by reading all Partners *e*Care-related emails and discussing Partners *e*Care during staff meetings to share the latest updates. Staff can also attend Town Hall meetings, and if they are unable to attend in person, they can watch the online recording. Another great way to stay up-to-date is by viewing webinars and demonstrations on the Partners *e*Care intranet site.

Where can staff find helpful resources?
The MGH Partners *e*Care website offers a collection of valuable resources to guide you through the implementation process. Please visit *https://partnersecare.partners.org.* ■

The MGH launches research patient engagement program

THE MGH HAS LAUNCHED a new comprehensive research patient engagement program, "Research Opportunities Direct to You," to increase patient participation in research studies and clinical trials. The program is the first step in a larger Partnerswide effort to engage patients in future research studies.

Upon arrival at the MGH registration or check-in desks, patients now will be asked if they would like to be contacted by researchers about upcoming studies or trials. Each patient will be asked to respond to this question only once, and their decision will then be recorded in their electronic medical record.

"Answering 'yes' means only that they agree to be contacted by a Partners researcher about studies that may be of interest to them, not that they have given approval to participate," says Maurizio Fava, MD, director of the Division of Clinical Research in the MGH Research Institute. "The goal of the program is to enable patients to take advantage of the MGH's research programs and address some of the challenges that clinical researchers face with enrollment."

As part of this new program, a designated toll-free number – 866-391-7030 – has been established to support patients who have questions.

"We are excited to fully launch 'Research Opportunities Direct to You,'" Fava says. "The program has already been successfully implemented in a number of our practices, and we've had a great response from patients and staff. Our patients are the backbone of research studies that allow us to discover medical breakthroughs and we appreciate everyone's help in making this program thrive."

— Greco

(Continued from page 1)

only choice," says Greco. "It was true; I knew I had no other choice. I have so much more to do in life and I had just accepted an amazing position. There was no way bladder cancer was going to get in the way of that."

The following 12 months were an intricate balance of meetings with parents, chemotherapy, teacher evaluations, CT scans and efforts to ensure her students' success. As the new year approached, however, Greco made the decision to take a medical leave to undergo an eight-hour procedure in which surgeons constructed a new bladder, called a neobladder, out of her intestine. Her clinical team – led by Frank McGovern, MD, of the Department of Urology – worked to reduce the tumor's size and eradicate microscopic cancer cells prior to removing her bladder by prescribing intensive chemotherapy with a combination of medications over a period of six weeks.

"Kate approached this difficult treatment with unbreakable courage and determination, managing multiple side effects, cumbersome clinic appointments and long chemotherapy visits with unflappable focus," says Meneely. "Despite a complicated diagnosis at a young age, she never asked 'Why me?' and she always arrived with a smile. Two days after surgery, she was handing out Christmas cards to her team members. She is truly an inspiration to all those facing cancer."

With her cancer treatments now behind her, Greco has returned to her passion as an assistant principal, but her connection to her caregivers and the MGH continues. She spends each Monday afternoon volunteering at the hospital as a patient escort, providing others with that extra bit of positivity that helped her during her time at the MGH.

"I was never at chemotherapy alone. My family and friends filled the space around my chair and entertained me for hours," says Greco. "During my last session, we even had to find more chairs. It was standing room only in there. They went in to work late, left work early or took vacation days just to spend time with me. I am so lucky."

Greco says she has learned amazing lessons during her battle that she hopes to share with others. "Strength comes from a place of positivity," she says. "You must know what the end goal is and start heading for it from day one. Each cancer patient faces some scary things, but with a smile the outcomes and ride along the way are surely always better." ■

My Giving Helps gives back

THE 2015 MY GIVING HELPS: The MGH Fund + United Way employee campaign celebrated the third week of its annual fundraising efforts from Sept. 21-25 by dedicating the week to the United Way. As part of the events, employees assembled back-to-school backpacks for MGH pediatric patients and children in need within the community.

Nutrition and Food Services also baked blue and orange cookies that were sold at hospital eateries. In a sweet twist that allowed employees to feel even better about indulging in the treat, proceeds from the cookie sales benefitted United Way.

"Nutrition and Food Services is proud to partner with My Giving Helps to make the campaign accessible to employees across campus," says Joan Shea, director of Nutrition and Food Services. "MGH eateries play a role in the daily routines of thousands of employees. We have a great opportunity to help spread an important message and allow employees to participate in the campaign."

PROUD PARTNERS: MGH employees enjoy assembling backpacks.

Gifts to the MGH Fund provide unrestricted dollars to support the most promising programs and initiatives at the hospital. Additionally, gifts to United Way provide assistance to more than 170 organizations in the Boston area. This year, there is double the reason to contribute. Any new or increased gift to the MGH Fund or United Way will be doubled in full, thanks to five generous donors.

To celebrate and encourage staff to contribute to the overall goal of obtaining 5,000 employee donors, MGHers can look forward to the final week of the campaign, Blue and Orange Week (Sept. 28-Oct. 2), a spirit week that offers employees a chance to win prizes for wearing campaign colors to show support.

To learn more about the campaign or to make a donation, visit *www.mygivinghelps.org*.

CARING COLLEAGUES: Lantagne, Kelly wearing red "survivors" hat

Team Titanium supports heart health

NEARLY 200 MGH staff, patients and family members joined more than 10,000 walkers on the Charles River Esplanade Sept. 12 for the 2015 American Heart Association (AHA) Boston Heart Walk, raising $22,000 to support the AHA's clinical, educational and research initiatives. This year's walk was especially poignant for MGH's "Team Titanium," created by Kristyn Lantagne, administrative manager in the Cardiology Division, who recently underwent cardiac surgery three months before her wedding. "My colleagues quickly became my caregivers and provided me with amazing support. My MGH Heart Center family assured me they were with me every step of the way and that I would walk down the aisle on my wedding day. Not only did the MGH care for my heart, but they cared for me as a person. I walk to honor them and the work they do every day." ■

EDITOR: Colleen Marshall Delaney • 617-726-0275 • **ASSISTANT EDITOR**: Colleen Keilty • 617-724-2753
EMAIL: *Hotline@partners.org* • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.

10.02.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Hospital's waste becomes farm's energy

THE MOST FREQUENTLY ASKED QUESTION Latoya Brewster, manager of Nutrition and Food Services at Eat Street Café, and her team are asked is why the MGH doesn't have trash and recycling bins readily available in its cafeteria. Food trays are simply placed on a conveyer belt that leads into the kitchen.

So what exactly happens with all the food waste produced at the hospital each day? It's used for electricity, heat, fertilizer and much more.

In October 2014 the MGH teamed up with Agri-Cycle Energy and now six days a week the company picks up the hospital's food waste and transports it to Stonyvale Farm in Exeter, Maine. There it is mixed with manure from the farm's 1,000 cows in a large anaerobic digester.

When the manure and organic waste mixture are heated to just over 100 degrees Fahrenheit in the digester, an energy-packed supply of

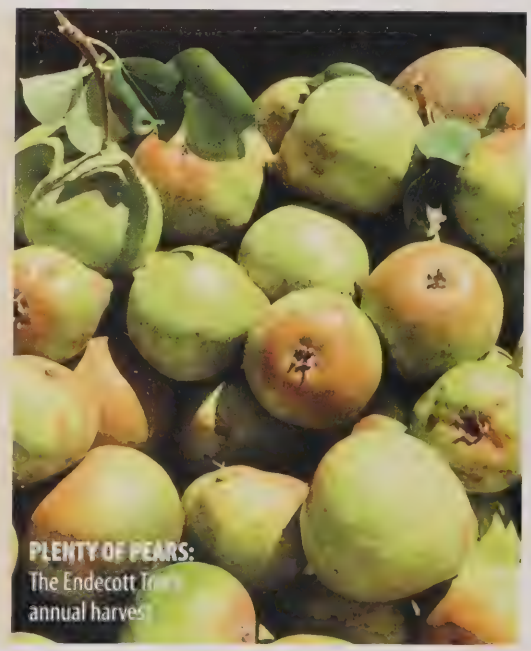
(Continued on page 4)

Endecott Pear Tree provides abundant harvest

AT MID-DAY ON SEPT. 23, officials of Mass General/North Shore Center for Outpatient Care in Danvers opened the locked gate protecting the oldest living cultivated fruit tree in North America. Richard Grant, arborist with Mayer Tree Service, inspected the condition of the tree, dubbed it robust and healthy and then hand-harvested the abundant crop of pears. The tree provided a bounty of pears and is also the first year that the baby Endecott Pear Tree, an offshoot of the main tree, has borne fruit.

"The hardiness of the tree continues to surprise me," says Elena Sierra, executive administrative director at MGH/North Shore. "After the toughest of winters and so many years, we had the biggest harvest to date."

The Endecott Pear Tree was planted nearly 400 years ago by the first governor of the Massachusetts Bay Colony, John Endecott. It is the last surviving fruit tree of many that were planted under the direction of Endecott. The pears have since been known as Endecott Pears, and are harvested every year. Over the years the tree has survived hurricanes, snowstorms, neglect, soil stripping, industrial development and vandalism.



PLENTY OF PEARS: The Endecott Tree's annual harvest

My Giving Helps comes to close

THE 2015 MY GIVING HELPS: The MGH Fund + United Way employee campaign celebrated the final week of its annual fundraising efforts Sept. 28-Oct. 2. The campaign ended with a sea of blue and orange roaming through the MGH halls. Employees sported their hospital spirit, wearing campaign colors for a chance to win a variety of prizes such as restaurant gift cards and concert tickets.

Led by campaign co-chairs David Brown, MD, chief of Emergency Medicine, and Harry Orf, PhD, senior vice president for Research, the 2015 My Giving Helps campaign is a monthlong celebration where employees have an opportunity to donate to the MGH Fund, United Way or both. Gifts to the MGH Fund provide unrestricted dollars to support the most promising programs and initiatives at the hospital. Gifts to United Way provide assistance to more than 170 organizations in the Boston area.

SHOWING SUPPORT: Members of the Development team in their festive blue and orange attire.

This year, there is double the reason to contribute. Any new or increased gift to the MGH Fund or United Way will be doubled in full, thanks to five generous donors.

Although contributions to the campaign are accepted year-round and final results for the 2015 My Giving Helps campaign will not be available until early next year, preliminary results will be announced later this fall. The campaign aims to engage 5,000 employee donors this year, an increase of almost 20 percent over 2014.

To learn more about the campaign or to make a donation, visit *www.mygivinghelps.org.* ■

Vigils unite communities

HOPE AND HEALING: In recognition of National Recovery Month, the Charlestown Substance Abuse Coalition joined the Charlestown Health and Development group for the seventh annual Candlelight Vigil to remember those who have lost their battle with drugs and alcohol and to give hope to those struggling with addiction. The event was part of a series of programs held throughout September to raise community awareness. In Revere, the ninth annual Beach Memorial was organized by Revere CARES and the city of Revere. Both vigils served as reminders of the communities' dedication to help those involved with substance-use disorders understand they are part of a larger community and that they are not alone in their struggle.

Andrew A. Nierenberg honored as inaugural incumbent of endowed chair

ANDREW A. NIERENBERG, MD, director of the Bipolar Clinic and Research Program, was honored Sept. 3 as the inaugural incumbent of the Thomas P. Hackett, MD, Endowed Chair in Psychiatry. The chair was established through the generosity of several donors, including Kent and Elizabeth Dauten.

"The Hackett chair is a perfect tribute to Dr. Andrew Nierenberg, who is the ideal first incumbent," said Britain Nicholson, MD, chief medical officer, who served as the event's master of ceremonies. "Like Tom, Andy is a go-to critical thinker and thought leader who can appreciate all sides of a complex challenge."

Nierenberg joined the MGH Psychiatry Department in 1992. His primary interests are treatment-resistant depression, bipolar depression and the longitudinal course of mood disorders and he has been recognized nationally for the treatment of mood and anxiety disorders.

Nierenberg helped lead Systematic Treatment Enhancement Program for Bipolar Disorder and Sequential Treatment Alternatives to Relieve Depression, two National Institute of Mental Health clinical trials that include thousands of patients with mood disorders. He currently is the principal investigator for the Patient-Centered Outcomes Research Institute Mood Patient-Powered Network. The group's goal is to collaborate with 50,000 patients across the country to use patient reported outcomes and electronic medical records as a national infrastructure for future studies.

Hackett, the chair's namesake, was chief of Psychiatry at the MGH from 1976 until his death in 1988. "He was absolutely beloved and revered as a chief, animating and enhancing all he touched. His life and his work remain an inspiration," said Nicholson.

More than 85 guests attended the ceremony honoring Nierenberg at the Paul S. Russell, MD Museum of Medical History and Innovation, including donors, Nierenberg's family, friends and colleagues as well as members of the Hackett family.

PERFECT TRIBUTE: Kent and Elizabeth Dauten, and Nierenberg and his wife, Karen Blumenfeld.

"The Hackett chair is a great honor that will give me the time to be curious, to ask good questions and to work with fellow researchers to seek answers," said Nierenberg. "Even more important, it will help generations of researchers who come after me continue to do so at the MGH."

eCare Corner

What does it mean? Terms to know now

Partners eCare is a Partnerswide initiative to implement Epic, the electronic health record and administrative system at each hospital and affiliated health care site. The single electronic medical record will allow a patient's health-related information to be shared among authorized clinicians and staff from anywhere within the Partners network.

Epic: Epic is the primary technology vendor for the Partners *e*Care system. Partners selected Epic because of its reputation as a leader in health information technology and its success working with some of the nation's most respected academic medical centers and health systems. Epic software will form the backbone of the Partners *e*Care program, replacing and integrating most of the existing core clinical and administrative systems at the MGH.

Super User: Staff who attend training first, support end-users in classroom training, offer insight into operational changes and support end-users at go-live are called super users. A super user is a knowledgeable advocate within a department who will serve as a liaison between users, department leaders and the Partners *e*Care team. They will become a key resource both before and after go-live for departments.

Credentialed Trainer: A credentialed trainer leads user training with the curriculum designed by Partners *e*Care-certified instructional designers. They will prepare for classes, set up the classroom, and facilitate follow-up on any outstanding questions that arise, collect valuable feedback from trainees and report that information to the instructional designer.

Peer Educator (providers only): A peer educator is a provider (MD/DO/NP/PA) from within a specialty who co-facilitates end user training with the credentialed trainer. Peer educators will provide workflow expertise during training, answer questions during classes and emphasize clinical points.

Go-Live: This is when the new electronic system will become operational.

Cutover: The coordinated set of activities required to discontinue the technology and business operations of the previous system and resume them on the new Epic system applications is called a cutover.

Test Drives: A test drive is a hands-on, facilitated exploration of the Partners *e*Care system for clinicians. Basic and specialty scripts are used to demonstrate Epic functionality and workflows. The goal is to provide clinicians with an understanding of how their work will function in the Partners *e*Care Epic build. This format is especially suited for clinicians who have not previously experienced Epic.

Playground: An Epic environment specifically built and maintained for end user training and practice prior to go-live is called the playground.

Partners Patient Gateway: The new Partners HealthCare patient portal is called Partners Patient Gateway. MyChart gives patients controlled access to the same Epic medical records as their provider via an internet browser or mobile phone application. MyChart is integrated with the electronic medical record, making it easy for patients to get involved in their own health care.

Charge Capture: With the current system, charge and clinical documentation are separate functions completed in different systems. With Partners *e*Care, that will change, and charges will be automatically generated by clinical documentation or by using easy and highly-integrated charge preference lists.

MedRec: Pre-admit and discharge reconciliation of a patient's medication list is named MedRec.

In Basket: The electronic messaging system used within Epic applications. This is a hub for patient information, including material related to test results, medication refills, cosigns, patient communication and provider-to-provider messaging. ■

Case Management celebrates 20th anniversary

THIS YEAR, the MGH Case Management Department celebrated 20 years with a special gala dinner celebration Sept. 17 at the Hotel Marlowe in Cambridge.

The goal of Case Management is to empower patients to manage the impact of illness on their lives and function in the community and on family dynamics, and to achieve the maximum benefits from health care services throughout the continuum.

The department is continuing its celebration with a poster display across from Coffee Central between Oct. 5-Oct. 19. Case Management tables also will be in the White hallway on Oct. 13 and Oct. 15 from 8 am to 3 pm.

In addition, Suzanne O'Connor, RN, MSN, will present "Winning with Change and Changing to Win: Building Agility for a Faster Moving Healthcare System" from noon to 1 pm on Oct. 27 in the O'Keeffe Auditorium.

TWO DECADES STRONG: Members of the Case Management team

— *Farm energy*

(Continued from page 1)

biogas – a combination of methane and carbon dioxide – is produced, which is then burned into heat and electricity. The combustion of the biogas also is used to produce organic fertilizer for the farm, organic soil additives, compost and comfortable bedding for the cows.

"We are very proud about this initiative," says Bill Banchiere, director of Environmental Services, who spearheaded the program. "It is something very different but so helpful."

"We are very proud about this initiative. It is something very different but so helpful."

— Bill Banchiere

The farm's digester currently returns to the grid enough heat every day to replace 700 gallons of heating oil and 22,000 kilowatt hours of electricity. Broken down, that is enough energy to heat 300 homes and power 800 homes in New England per year.

"This program is why we do not have trash and recycle bins available in the MGH eateries," says Brewster. "There is so much to sort out correctly that we need to do it all behind the scenes." Five-gallon white buckets are available for cafeteria staff to dispose of all compostable food, recycling is sorted out separately and there is even a pulper to chop up Styrofoam products.

From Oct. 1, 2014 – when this initiative began – through Aug. 31, 2015, the MGH has sent 358 tons of organic waste to Stonyvale Farm. From the MGH's waste mixture alone, the farm has been able to offset fuel costs for more than 10,000 vehicles, created 71,600 gallons of natural liquid fertilizer and produced about 180 yards of compost.

The farm owners continue to expand and grow their business. Currently they are creating a larger digester and want to build an adjacent greenhouse to take advantage of the excess heat and nutrients it generates.

"We are the only Partners hospital so far to be doing this, and we hope to continue to work to help produce energy for a long time moving forward," says Banchiere. ■

Slimy gooed time

FESTIVE FUN: In honor of National Childhood Cancer Awareness Month, the MassGeneral Hospital *for* Children (MGH*f*C) Pediatric Hematology-Oncology Clinic hosted its annual Slime Day Sept. 24. Patients and their families spent the morning making the green goo with help from the staff of The Hole in the Wall Gang Camp's Hospital Outreach Program. They then lined up for their chance to dump it on Heather Peach, an MGH*f*C Child Life specialist, while they sang a special Slime Day song.

MGH ready to celebrate HUBweek

THE MGH WILL HOST extraordinary programs, take on tough health care challenges and showcase advances in neuroscience, cancer research and care delivery as part of Boston's first HUBweek festivities, from Oct. 3-10. The hospital joins Harvard University, Massachusetts Institute of Technology and *The Boston Globe* in presenting HUBweek, a weeklong gathering throughout the city to celebrate the big ideas and bold solutions that emerge from the people and intellectual energy found in Greater Boston. From arts and culture to technology and cutting-edge medicine, Boston is harnessing curiosity to create the future.

All HUBweek events at the MGH are free and open to the public, however advance registration is required. Visit *www.massgeneral.org/hubweek/* to learn more.

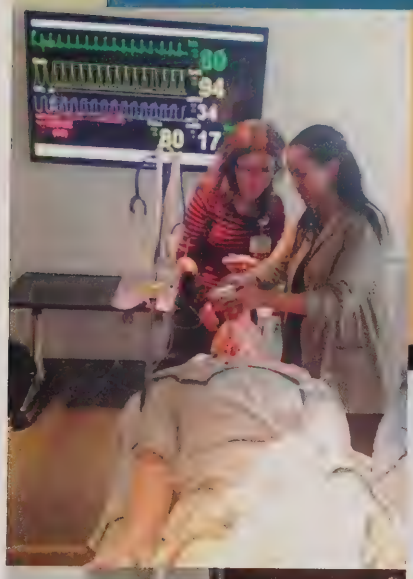
MASSACHUSETTS GENERAL HOSPITAL

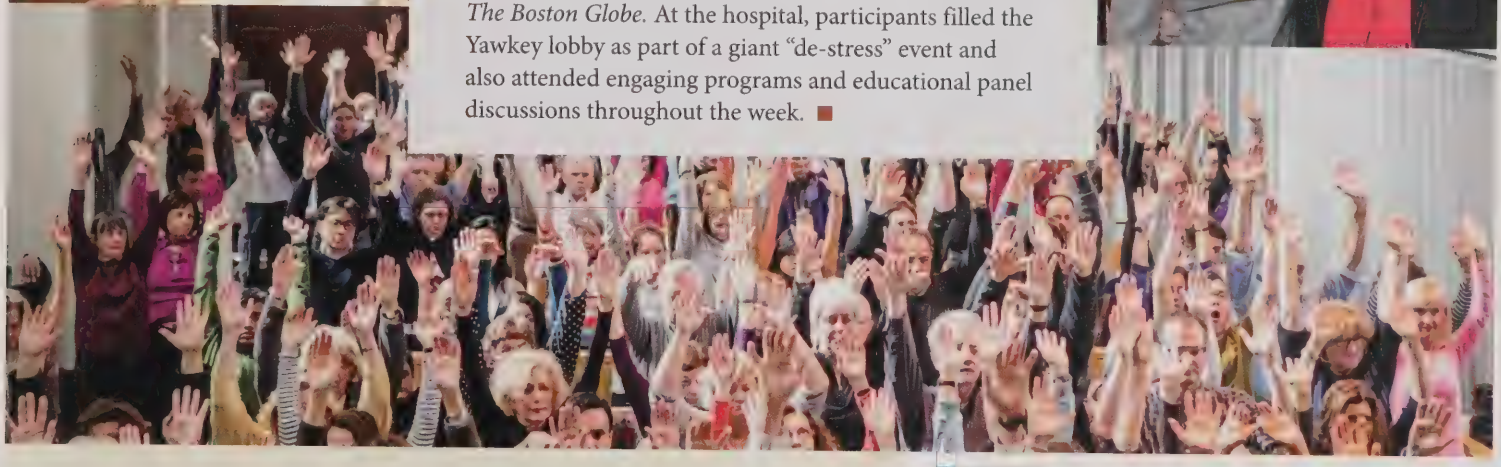
EDITOR: Colleen Marshall Debaney • 617-726-0275 • **ASSISTANT EDITOR:** Colleen Kelly • 617-724-2753
EMAIL: Hotline@partners.org • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.

10.09.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL



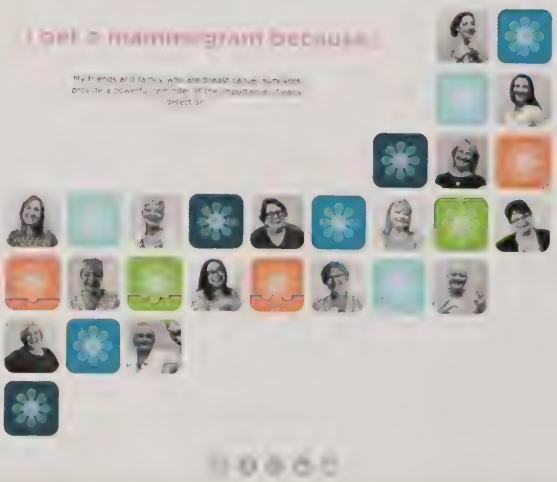


Celebrating HUBweek

MORE THAN 1,000 PEOPLE visited the MGH this week to celebrate art, science, technology and breakthroughs in life sciences as part of the first HUBweek, Oct. 3-10. The citywide festival was hosted by the MGH, Harvard University, Massachusetts Institute of Technology and *The Boston Globe*. At the hospital, participants filled the Yawkey lobby as part of a giant "de-stress" event and also attended engaging programs and educational panel discussions throughout the week. ■

'I get a mammogram because ...'

Inspirational website launches for Breast Cancer Awareness month



"I GET A YEARLY MAMMOGRAM because my mother has survived breast cancer twice, and both times it was discovered during a routine mammogram," says Nie Bohlen, RN, MSN, project manager at the MGH Cancer Center.

Bohlen's is just one of the many reasons why women get mammograms. In a new website launched Oct. 1 for Breast Cancer Awareness Month, MGH employees shared the reason they have had their mammograms. And their moving answers, along with photos and videos, are now part of the website created by MGH Imaging. Visit *www.massgeneralimaging.org/oct2015*.

The MGH uses breast tomosynthesis to screen patients and distinguish harmless abnormalities from real tumors, and every mammogram is read by a radiologist who specializes in breast imaging.

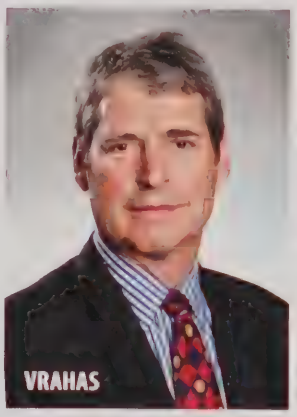
"First, I do this for myself," says Mary Lee Gamache, administrative assistant in Health Information Services. "My body is the only temple of me, and my wellness keeps me strong. Second, my family and friends have lost too many loved ones to cancer. I want to be celebrating more milestones with them."

To request an appointment at the MGH or to learn more about getting a mammogram, visit *www.massgeneralimaging.org/mghmammo*.

Vrahas named Lovett Professor of Orthopedic Surgery

MARK S. VRAHAS, MD, vice chairman of the Department of Orthopædic Surgery, recently was named the Robert W. Lovett Professor of Orthopedic Surgery at Harvard Medical School (HMS). Vrahas was honored for his dedication to clinical care and his commitment to teaching and training future generations of doctors and scientists.

"It is a great pleasure to honor Dr. Vrahas as the Robert W. Lovett Professor in Orthopedic Surgery," says Harry Rubash, MD, chief of Orthopædic Surgery. "Dr. Vrahas has contributed to the development of trauma care treatment throughout the world and has made numerous advances. He highly deserves this prestigious professorship, and we look forward to his continued contributions in the field of trauma care."



Vrahas, who first came to the MGH in 1999, helped create the Partners Orthopædic Trauma Program at the MGH and BWH, which is recognized both nationally and internationally for clinical excellence. He also founded the Harvard Orthopedic Trauma Initiative, created to foster collaboration among the orthopedic trauma services at all Harvard-affiliated teaching hospitals in Boston – the MGH, Beth Israel Deaconess Medical Center, Boston Children's Hospital and BWH.

Robert W. Lovett, MD, was born in Massachusetts and remained here for his whole life, graduating from HMS and receiving his surgical training at City Hospital in Boston. Lovett consulted with and examined President Franklin D. Roosevelt after he contracted polio and became partially paralyzed during the summer of 1921. The Robert W. Lovett Fund was established at HMS in 1926 with the purpose of "organizing on a large scale the means for study and treatment of those diseases which produced deformities." It later was converted to an endowed professorship in Orthopedic Surgery.

Vrahas was appointed to the position in August. He is the second incumbent of the chair, succeeding Christopher Evans, PhD.

A reception to honor Vrahas will take place later this year.

Pedaling the path to a healthy future

COMPLETING A 200-MILE BIKE RIDE in four days is no easy feat, especially not for a heart transplant recipient. However that is exactly what Harold Strope did to celebrate the 20th anniversary of his lifesaving surgery at the MGH. On Oct. 1 – accompanied by his daughter Sarah, their friends and more than 50 fellow biking enthusiasts – Strope cycled the same route that he'd been taken in an ambulance years before from Albany, New York to Boston.

In 1994, after initially being treated for bronchitis, Strope was diagnosed with congestive heart failure at age 47. "This diagnosis meant my dad was on a one-way path that couldn't be changed by any course of exercise, rest, antibiotics or steroids," says Sara. "The only way to improve his deteriorating health was a heart transplant – and we immediately started researching the best transplant programs and the waiting list evaluation criteria. That's when we found the MGH."

At the time, the MGH was one of only a few hospitals in the Northeast evaluating patients for transplants. By fall of 1995, Strope's condition had deteriorated – his heart was functioning at less than 10 percent efficiency – and he became the second person on the donor waiting list.

Strope was matched with a heart on Oct. 27, 1995 and underwent surgery, performed by Joren Madsen, MD, DPhil, now director of the MGH Transplant Center, while under the care of Marc Semigran, MD, director of the MGH Heart Failure/Cardiac Transplant Program.

"It wasn't immediately back to life as we had known it after my transplant," says Strope. "I learned to be cautious about new things, like infections, that were now a problem because of my suppressed immune system. I knew it would take time to rebuild my strength."

Strope and his family are grateful for the care he received at the MGH and they now are working to raise awareness of the importance of organ donation while celebrating more than two decades of heart health. Strope's family have embraced his passion for cycling, a newfound joy since his retirement, and community fundraising efforts to support the MGH Heart Failure and Cardiac Transplant Program at the MGH Corrigan Minehan Heart Center, with a focus on family support services.

"Harold's remarkable health since his transplant 20 years ago represents the product of his adoption of a healthy lifestyle, the support of his family, and the teamwork and dedication to patient care of members of the MGH Cardiac Transplant Program," says Semigram.

Says Strope, "Thanks to my new heart, I am an active man who watched my son graduate from medical school, followed my daughter's climb up Mount Kilimanjaro and traveled the U.S. with my wife. Organ donation, combined with the care I received at the MGH, has given me this chance." ■

AN ELATED EMILIE
Strope and his daughter Sara after completing their 200-mile bike ride

eCare Corner

Super users, who they are and what to know

Partners eCare is a Partnerswide initiative to implement Epic, the electronic health record and administrative system at each hospital and affiliated health care site. The single electronic medical record will allow a patient's health-related information to be shared among authorized clinicians and staff from anywhere within the Partners network.

SUPER USERS are a core component of the successful implementation of Partners eCare at the MGH and are critical to its long-term success.

What is a super user?

A super user is a knowledgeable advocate within a department who will serve as a liaison between users, department leaders and the Partners eCare team. Super users become an embedded resource both before and after go-live for their department. A super user's main responsibility is to support activities before, during and after go-live.

A super user acts as:

- A resource to colleagues on how Epic works in the clinic, practice, unit or department.
- Support for trainers during classroom training sessions to coach colleagues new to Epic.
- A resource for colleagues before, during and after go-live, answering questions and helping troubleshoot problems.

What does a super user do?

Before go-live:

- Completes super user training.
- Assists with usability testing.

During go-live:

- Leads and reinforces standard workflows and best practices.
- Provides at-the-elbow support for users within a department, clinic or practice.
- Mentors staff about using applications by being approachable and available.
- Prioritizes patient care safety at all times.
- Assists to resolve workflow or application issues.
- Participates in daily briefing meetings, provides information regarding their department, clinic or practice and reports back to colleagues.

After go-live:

- Works with training team to help reinforce or deliver refresher training and distributes information on changes or enhancements.
- Guides staff in using Epic to help them do their jobs.
- Provides feedback about users' skills and knowledge. ■

Advancing diversity and inclusion through Faculty Development Awards

A FEELING OF JUBILANCE charged the air at the Paul S. Russell, MD Museum of Medical History and Innovation the evening of Sept. 21, as MGH leaders, faculty, trainees and medical students gathered to welcome newcomers to the MGH and celebrate the 2015 Center for Diversity and Inclusion (CDI) Faculty Development Awards.

"This is an event I look forward to every year," said Peter L. Slavin, MD, MGH president. "I strongly believe that diversity is critical to advancing the mission of this hospital. It is only fitting that we recognize these awardees here tonight, in this museum where we recognize some of the MGH's greatest accomplishments."

This year's eighth annual event, hosted by the CDI and Slavin, honored four awardees. Ersne Eromo, MD, of the Department of Anesthesia, Critical Care and Pain Medicine, and J. Alejandro Rauh-Hain, MD, of the Department of Obstetrics and Gynecology, both received the 2015 Clinician-Teacher Development Award. Martin Aryee, PhD, of the Department of Pathology, and Opeyemi Olabisi, MD, PhD, of the Nephrology Division, were each presented with the 2015 Physician/Scientist Development Award.

"The CDI is providing that support to get these award winners off the ground," said Thomas Lynch Jr., MD, MGPO chairman and CEO.

Elena Olson, executive director of the CDI, congratulated the awardees, and presented a video of testimonials outlining accomplishments of the CDI and past award recipients. Each recipient offered thanks and spoke about their research, clinical and education projects being funded by the award.

"This provides the opportunity to bring our research to the next level and improve our academic careers," said Rauh-Hain. "I cannot thank all those who have supported me enough."

For more information about the CDI and its Faculty Development Award program, visit *www.massgeneral.org/cdi.*

AWARDEES PAST AND PRESENT: The four 2015 award recipients gather with winners from past years.

Home Base's Mission Gratitude concert and Veterans Day Telethon

COUNTRY MUSIC SUPERSTAR Reba McEntire will headline the Red Sox Foundation and MGH Home Base Program's Mission Gratitude concert at 7 pm on Nov. 9 at Boston's Symphony Hall. The annual benefit honors service members and veterans and raises funds for Home Base, the first and largest private-sector program in America solely focused on healing the invisible wounds of war – including post-traumatic stress and traumatic brain injury – for service members, post-9/11 veterans and military families.

"I am honored that Home Base invited me to join Mission Gratitude in giving back to the servicemen and servicewomen who have done so much to serve our nation," says McEntire. "I'm happy to lend my voice to a cause that works to heal the invisible wounds of war, and I hope to see more of the community join us on Nov. 9."

In addition, on Nov. 11 Home Base will host a Veterans Day Telethon from 7-8 pm on Nov. 11 on WCVB-TV, NewsCenter 5. The show will feature patient stories and information about how the program helps veterans not only to build a more resilient life, but also to thrive.

"Every dollar we raise from the Veterans Day Telethon and the Mission Gratitude concert will go toward helping Home Base, as we continue to heal the invisible wounds of war on a local, regional and national level," says retired Brig. Gen. Jack Hammond, executive director of Home Base. "Through our clinical care, wellness-based programs, fitness, education and research, Home Base makes a difference in the lives of our veterans and their families, and we couldn't do it without the support of our sponsors and individual donors."

Telethon viewers can call in during the broadcast to make a donation, or they can text-to-give by texting GRATITUDE to 41444 and clicking the link provided. To purchase tickets to Mission Gratitude, visit *www.MissionGratitude.com*.

TACKLING THE COURSE: An MGH team runner during the 2015 marathon

Run the 120th Boston Marathon with the MGH

THE MGH now is accepting applications for the 2016 Boston Marathon on April 18, 2016. John Hancock has designated 100 bibs in support of pediatric cancer care and research, and 40 bibs to support emergency response. Applications are due Oct. 31. For more information, contact Ashley Bronson, associate director of Special Events, at *abronson@partners.org* or 617-726-7837.

Since 1998, more than $11 million has been raised by the pediatric cancer team, *Fighting Kids' Cancer ... One Step at a Time*, to support MassGeneral Hospital *for* Children's care and research initiatives that enhance the quality of life of the hospital's youngest cancer patients and their families. Over the past two years, the Emergency Response team, *Ready When Seconds Count*, has raised nearly $700,000 to support emergency preparedness and disaster training. In 2015, runners who obtained their own bib numbers and ran as part of the Miles for Mass General program collectively raised more than $155,000 to support the Mass General Cancer Center, Cystic Fibrosis, The Lurie Center, MIND for Huntington's and Pediatric Palliative Care. ■

Change in *Hotline* schedule

MGH Hotline will not publish Oct. 16 because of the Columbus Day holiday. The regular publication schedule will resume Oct. 23.

MASSACHUSETTS GENERAL HOSPITAL

EDITOR: Colleen Marshall Delaney • 617-726-0275 • **ASSISTANT EDITOR:** Colleen Keilty • 617-724-2753
EMAIL: *Hotline@partners.org* • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.

10.23.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

REMARKABLE CAREERS: From left, Austen and DeSanctis, and Isselbacher

Celebrating service

IN 1950 – when the country's hit song was "Singin' in the Rain" and when admission rates at the MGH were at an unprecedented high of $13 per day – Kurt Isselbacher, MD, now director emeritus of the Cancer Center, began his 65-year career at the hospital. Five years later in 1955 – when "Tutti Frutti" became the top hit and when a polio epidemic created the biggest single impact on the hospital, admitting 428 patients – W. Gerald Austen, MD, now surgeon-in-chief emeritus, and Roman DeSanctis, MD, now director emeritus of Clinical Cardiology, both began their 60-year careers at the hospital.

The three men were celebrated for their extraordinary years of service on Oct. 16 at the MGH's annual Ether Day celebration in the Bulfinch Tents. They joined more than 3,400 employees celebrating five-year milestones of working at the MGH.

"How many companies can say they have employees who have been a part of their organization for more than a quarter of its existence?" asked Peter L. Slavin, MD, MGH president. "Not many – especially not those who have been around for more than 200 years. These milestones say so much about the MGH and the people who make it the special place that it is."

Each October the Ether Day celebration is held on the Friday closest to the anniversary of the first successful public demonstration of ether

(Continued on page 2)

A treasure trove of fun and festivities

MORE THAN 550 GUESTS sailed into a swashbuckling world of pirates and buried treasure during this year's Storybook Ball, which drew its inspiration from the classic children's adventure tale, "Treasure Island." The annual fundraiser for MassGeneral Hospital *for* Children (MGH*f*C) raised $1.6 million to support research initiatives and patient care programs. Since its inception, the event has raised more than $23 million for MGH*f*C.

The Oct. 17 event at The Castle at Park Plaza in Boston highlighted pediatric brain disorders and brain surgery. MGH*f*C is recognized internationally for groundbreaking research and clinical care that has greatly advanced the understanding and treatment of conditions affecting the developing brain. These include pediatric epilepsy, traumatic brain injuries and concussions.

"Treasure Island," by Robert Louis Stevenson, is a coming-of-age tale, and so guests heard the coming-of-age story of patient Josh Canales. Sixteen years ago, Josh was diagnosed prenatally with spina bifida, a defect of the spine. In the first four days of Josh's life, William Butler, MD, MGH*f*C neurosurgeon, performed one surgery to close the opening in Josh's spine and a second to insert a shunt in his brain. The shunt would alleviate Josh's hydrocephalus, an accumulation of spinal fluid in the brain.

Josh is now a high school sophomore with a passion for soccer. However, in February his shunt became infected and he became severely ill. Butler once again stepped in, this time performing a rare

(Continued on page 4)

YO-HO-HO: Josh with Butler

Celebrating outstanding service to Latino community

TEN YEARS AGO, Ernesto González, MD, MGH dermatologist, was recognized with an award for Outstanding Service to the Latino Community. The award, later renamed in his honor, has since celebrated a decade's-worth of MGHers who have made exceptional contributions to improving the experience of Latino patients, families, visitors and employees.

Karen L. Mejia, a community health worker at the MGH Chelsea HealthCare Center, was selected out of 19 nominees as the winner of this year's prestigious award. Mejia was honored at a Sept. 29 ceremony at the Paul S. Russell, MD Museum of Medical History and Innovation.

"It is a testimony to the virtues of empathy and good Samaritanism that we had so many candidates this year," said González, who presented the award. "The award goes to a person who has demonstrated outstanding rigor, an amazing devotion to serve others and behavior beyond the call of duty."

When an unprecedented number of unaccompanied minors began to arrive in Chelsea in October 2014, Mejia made a career shift so she could better help these children. Many have come from Central America and escaped gang violence, abuse, poverty and lack of educational opportunities. According to her nomination, Mejia, who emigrated from Honduras as a teenager, helps these families in countless ways – including supporting families who register as MGH patients, making connections for them within the Chelsea Public School system and at city hall, running errands and also working to help ensure the safety of the children and teens in the community. Her colleagues say the scope of Mejia's selfless responsibilities is endless.

"Seventeen years ago I was one of those children who arrived in this country with the hope not to hide," said Mejia. "I am humbled to be able to help in some way to give these children a better future."

The Committee for Latino Initiatives and MGH Human Resources sponsors the annual event, which was hosted in connection with Latino Heritage Month. During the week, the committee – along with the Association of Multicultural Members of Partners – also hosted "The Challenge of Alzheimer's Disease Among Older Racial and Ethnic Minorities," with speaker Teresa Gomez-Isla, MD, PhD, MGH neurologist.

AND THE AWARD GOES TO: From left, González, Mejia and Jeff Davis, senior vice president of Human Resources

THE GOLD STANDARD: From left, Slavin, donors Rauch and Jerrold Rosenbaum, Marvin Davidson, psychiatrist-in-chief

Paula Rauch, MD, honored with endowed chair

PAULA K. RAUCH, MD, director of the Marjorie E. Korff Parenting at a Challenging Time (PACT) Program, was honored as the inaugural incumbent of the Timothy Christopher Davidson Endowed Chair in Psychiatry during a Sept. 10 ceremony at the Paul S. Russell, MD Museum of Medical History and Innovation

The endowment will provide support for the Korff PACT Program at the MGH Cancer Center, a program founded by Rauch in 1997 to provide guidance and support to families when a parent is facing cancer or any life-threatening illness.

"Paula is a visionary leader and an inspiring mentor who epitomizes the caring and compassionate physician," said Peter L. Slavin, MD, MGH president. "Paula wears many hats and she wears them all so well. She is a brilliant child psychiatrist and is often the first person any of our staff members call when they have an issue in their own family. The Davidson chair is a well-deserved honor."

Rauch also is the program director of family support and outreach for the Red Sox Foundation and MGH Home Base Program, and she is a teacher and supervisor on the Child Psychiatry Consultation Service to Pediatrics. In addition, she recently voiced the role of therapist Dr. Paula on "Arthur," a children's show that tackles the challenges of growing up.

"Rauch's PACT program deals with the practical but especially with the emotional aspects of life, illness, loss and death," said Davidson. "What Paula does is gives families the courage to bear one's losses."

The Davidson chair was initiated through the generosity of the Davidson family, with an anchor gift in memory of Timothy C. Davidson, along with more than 20 other donors and families.

"The incredible generosity of the Davidson family has created an enduring legacy of support for the PACT families we serve who face the unique challenges of parenting well while living with a life-threatening illness," said Rauch. ■

— *Ether Day*

(Continued from page 1)

used as a surgical anesthetic, which took place at the MGH on Oct. 16, 1846. Through the years, Ether Day has become not only an important historical anniversary but also an opportunity to celebrate and thank employees for their contributions to the MGH community.

"Every single person at the MGH matters," said Thomas Lynch Jr., MD, MGPO chairman and CEO. "Everyone counts. Our patients see all of you in some way every day, from the moment they arrive until they leave. The compassionate care and connection that everyone in this room makes with our patients matters."

Employees were recognized at the celebration by Jeff Davis, senior vice president of Human Resources, and each had received an honorary pin and ribbon. Those celebrating milestones of 20 years or more were honored at a formal dinner on Oct. 22 at the Weston Copley Place Hotel. ■

BEAUTIFUL BRAIN: Medical illustrator Danny Quirk demonstrates body painting during a session in the Ether Dome.

BOSTON'S INAUGURAL HUBWEEK, the weeklong celebration of innovation and creativity in Boston, enjoyed tremendous success citywide. More than 46,000 people participated in one of the 106 HUBweek events that took place throughout the week across Boston and Cambridge.

HUBweek, Oct. 3-10, was hosted by the MGH, Harvard University, Massachusetts Institute of Technology and *The Boston Globe*. Through various events and experiences, HUBweek showcased and enhanced Boston's reputation as a center of innovation, learning, medicine, technology and the arts.

"We had an incredible inaugural year of HUBweek here at the MGH," says Peter L. Slavin, MD, MGH president. "I am honored that the hospital had the chance to host such an important and extraordinary week for our city."

During HUBweek, the MGH hosted 17 different programs or events in nine different locations, involving 110 different speakers, which were attended by more than 2,000 guests – including representatives of some of the nation's largest health care systems and clinical and policy leaders from the Massachusetts health care community.

Among the week's highlights were a standing-room-only session about Alzheimer's disease, a daylong program on cutting-edge cancer diagnosis and treatment and a program focused on opioid addiction and brain science. More than 300 attendees participated in a giant relaxation session called "De-Stress Boston," led by the Benson-Henry Institute for Mind Body Medicine. A "Women in Medicine" speaker series was held nightly at the Paul S. Russell, MD Museum of Medical History and Innovation, featuring some of Boston's best known doctors and researchers.

Another notable part of HUBweek at the MGH was Massachusetts Gov. Charlie Baker serving as the keynote speaker for a daylong program devoted to value-driven health care. During his speech, Baker officially proclaimed the dates of Oct. 3-10 "HUBweek," and urged all residents to participate in the events as best they could. Other notable guests during HUBweek at the MGH included U.S. Rep. Katherine Clark; retired U.S. District Court Judge Nancy Gertner; substance abuse experts A. Thomas McLellan, PhD, and Wilson Compton, MD; *Still Alice* author Lisa Genova; retired New England Patriots and New York Giants Linebacker Ed Reynolds; WCVB anchor Kelly Tuthill; WBUR CommonHealth co-host Carey Goldberg; *The Boston Globe's* Neil Swidey and Priyanka Dyal McCluskey; and Fox 25 anchor Mark Ockerbloom.

"Thanks to the many departments and individuals who put so much time and effort into making HUBweek such a great success," says Slavin. "For those who created content, volunteered at sessions, moderated events, planned and simply participated, I thank you." ■

ENJOYABLE AFTERNOON: The MassGeneral Hospital *for* Children Cancer Center recently hosted its annual "Celebrating the Arts," a program to recognize patients in the Pediatric Hematology and Oncology Unit who participate in healing arts programs throughout the year. Participants, including Ereanny Manivong seen here, enjoyed an afternoon of arts and crafts, and music.

Lehman welcomed as new chief of Breast Imaging

LEHMAN

THE DEPARTMENT OF RADIOLOGY has announced the appointment of Constance Lehman, MD, PhD, as the new chief of the Breast Imaging Division, effective Sept. 1.

"I am delighted by the opportunity to join the MGH faculty," says Lehman. "I'm eager to work with my colleagues to accelerate progress in our shared mission to expand access for all of our patients to the highest quality, patient centered and affordable care."

After graduating from Duke University, Lehman received both medical and doctoral degrees at Yale University and completed her internship and residency training at the University of Washington in Seattle. She remained in Seattle and became professor and vice chair of Radiology and division chief of Breast Imaging at the Seattle Cancer Care Alliance. There she developed an internationally recognized program of excellence in patient care, education and research.

Lehman serves on a number of key national committees for the National Cancer Institute and the American College of Radiology (ACR). She has co-authored breast cancer screening recommendations by the American Cancer Society, the ACR and the National Comprehensive Cancer Network. In addition, she has authored or co-authored more than 150 peer-reviewed scientific publications. Her philosophy, she says, is focused on the notion that the health of the community can be improved by delivering the highest quality patient-centered care in a setting of active innovation and education.

10.23.15

MGH HOTLINE

— Storybook Ball

(Continued from page 1)

surgery to open a ventricle in Josh's brain that would allow for the permanent removal of his shunt. Today Josh is living without the worry of hydrocephalus or another shunt infection.

Storybook Ball co-chairs Adriana Hassan, Melissa Lynch, Jennifer Nassour and Rebecca Seidenberg opened the evening's program. Seidenberg, wife of Boston Bruins player Dennis Seidenberg, spoke about her own family's experience with brain injuries.

"Throughout his career, Dennis has had a few significant injuries but the scariest was when he suffered a serious concussion during a game," said Seidenberg. "Dennis and I have three children that are all involved in sports. As a parent, I am concerned about the possibility of concussions and how it could affect their developing brains. I feel better knowing that MGH*f*C has programs like the Sports Concussion Clinic, to help kids get back to doing what they love."

The program also included remarks from Ronald Kleinman, MD, MGH*f*C physician-in-chief, and Allan Goldstein, MD, MGH*f*C surgeon-in-chief. Peter L. Slavin, MD, MGH president, thanked guests for their generosity.

"Medical care for children is chronically underfunded, and much of the work that MGH*f*C does every day is not reimbursed by medical insurance," Slavin said. "At MGH*f*C, we all work together to defeat the enemy of disease – so our children can enjoy their own adventures, outside the hospital." ■

Sustaining a cancer community in the era of personalized medicine

ON OCT. 31 AT 9 AM the MGH Cancer Center's Network for Patients and Families and the Maxwell V. Blum Cancer Resource Center will present their annual conference in the Simches Research Center. The event will provide patients and families an opportunity to talk about experiences and identify together how to sustain an ongoing and supportive community.

Sessions will include lectures by Jeff Peppercorn, MD, MPH, director of the MGH Cancer Center Survivorship Program; Don S. Dizon, MD, director of the MGH Oncology Sexual Health Clinic; and Betsy O'Donnell, MD, director of Lifestyle Medicine and associate director of the MGH Cancer Center Survivorship Program.

This program is sponsored by the Conquer Cancer Coalition of Massachusetts, a non-profit organization driven to make a difference in the cancer community by raising funds and awareness for the fight against all cancers. To learn more or to register, visit *www.massgeneral.org/cancereducation/conference/*.

MGH Pharmacy celebrates National Hospital and Health-System Pharmacy Week

MGH PHARMACISTS and pharmacy technicians celebrated National Hospital and Health-System Pharmacy Week, Oct. 18-24. There were a variety of activities to thank staff and to promote the role of pharmacy in advancing patient care and outcomes.

"We want to be the top pharmacy department in the country and have implemented and will continue to implement various initiatives to play a leading role in collaborating with other disciplines to optimally manage patients medication needs and to improve safety and patient outcomes," says Christopher Fortier, PharmD, FASHP, MGH chief pharmacy officer.

Fortier says over the past year the Pharmacy Department has worked to meet the MGH organizational goals and specific needs of physicians, nurses and patients. Initiatives included hiring a Substance Use Disorder (SUD) Clinical Pharmacist to work with a new SUD team, recruiting and aligning clinically trained pharmacists into a service-based practice model, expanding the pharmacy residency program, creating a national best practice controlled substance diversion program and ensuring ongoing medication management compliance that contributed to the successful Joint Commission visit last spring.

In addition, the MGH Outpatient Pharmacy team has worked to improve customer service and clinician communication by creating a dedicated phone line to the pharmacy team, developed a quicker process for providers to pick-up patient discharge prescriptions, which significantly reduced patient wait times. The "Meds to Beds" service continues to be rolled out with great success in providing discharge medications and pharmacist medication education at the patient bedside to help address medication adherence, improve patient satisfaction and to work to prevent patient readmissions.

PHARMACY AT ITS FINEST: Resident Chloe Siu, PharmD, at left, discusses a patient's medications with resident Shaan Khurshid, MD, of the Department on Medicine.

MASSACHUSETTS GENERAL HOSPITAL

EDITOR Colleen Mastrioni Delaney • 617-726-0375 • ASSISTANT EDITOR Colleen Fahy • 617-724-2763
EMAIL hotline@partners.org • MAIL Public Affairs Office • 125 Nashua Street, Suite 820 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office

10.30.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

CARING FOR A FRIEND: Members of The Suzanne Wedel XOXOut Ovarian Cancer Committee, established to fund ovarian cancer research.

When the doctor becomes the patient

AS THE DIRECTOR of the emergency medical transport group Boston MedFlight, Suzanne Wedel, MD, is a critical care doctor who often is asked to provide an immediate diagnosis. Now Wedel is fighting for the possibility of an early diagnosis for tens of thousands of women like her, with ovarian cancer.

Three years ago her symptoms were vague – bloating and a pain in her shoulder. It took her concerned husband (she is married to Alasdair Conn, MD, chief emeritus of Emergency Medicine at the MGH), a persistent primary care physician and a series of tests and scans before Wedel was diagnosed with metastatic ovarian cancer. She currently is a participant in an MGH research trial and wants to help fight the disease that is known as "the silent killer."

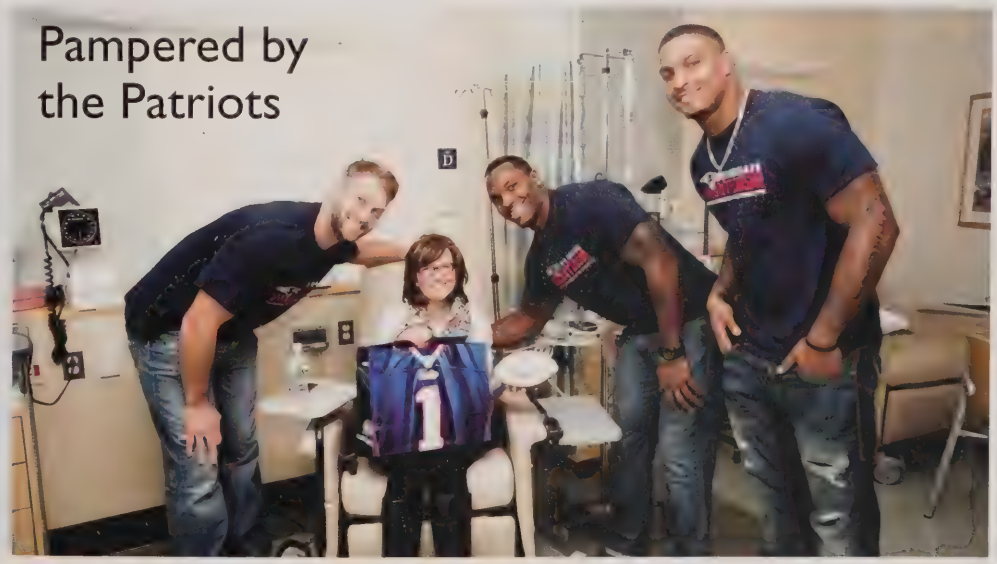
"Every patient needs an advocate," says Wedel. "Ovarian cancer gets no attention, it gets limited funding, it affects women in the prime of their life. There are no easy ways to find out if you have ovarian cancer or even do surveillance for it."

A fundraiser was held Oct. 7 at the Eastern Yacht Club in Marblehead to benefit the Suzanne Wedel XOXOut Ovarian Cancer Fund, named because Wedel often signs personal emails "xoxo – skw." More than $75,000 has already been raised to support critical research at the MGH.

At the fundraiser, Wedel and her MGH doctors, Marcela del Carmen, MD,

(Continued on page 2)

Pampered by the Patriots



A SUPERSTAR SURPRISE: On Oct. 13, Scott Chandler, Darius Fleming and Rufus Johnson of the New England Patriots paid a surprise visit to the Yawkey 9 Infusion Unit in honor of Breast Cancer Awareness Month. The players greeted dozens of patients and surprised five lucky ladies with tickets to the Patriots Day of Pampering on Oct. 19 – a program designed for those undergoing treatment for breast cancer. The daylong event featured a healthy breakfast and lunch as well as yoga and spa treatments. Here, Liz Chambers of Harvard, Massachusetts, accepts her ticket package from Chandler, Fleming and Johnson.

Ecker named new chief of Obstetrics and Gynecology

JEFFREY ECKER, MD, director of Obstetrical Clinical Research and Quality Assurance, has been named chief of the MGH Vincent Department of Obstetrics and Gynecology, effective Dec. 1.

Ecker has been an integral part of the department for the past 18 years. He has committed much of his career to understanding and optimizing pregnancy outcomes, often as part of collaborative research efforts, and studying metabolic complications of pregnancy such as preeclampsia and gestational diabetes. Ecker also has examined experiences and outcomes of pregnancies among women with disabilities.

ECKER

"I am honored to have been asked to serve as the chief of Obstetrics and Gynecology at the MGH," says Ecker. "When I first arrived at our hospital 28 years ago as a medical student for a gynecology rotation, I had much to learn. This department and institution have taught me much and have remained at the center of my professional life nearly every moment since."

After graduating from Princeton University and Harvard Medical School, Ecker entered residency training in OB/GYN as part of the MGH/Brigham and Women's Hospital combined program. At the time of his residency, the only deliveries at MGH were patients who presented to the Emergency Department in advanced labor, so the MGH portion of the program instead focused on gynecologic care and surgery. He later trained at the University of California, San Francisco where he completed fellowships in maternal fetal medicine and obstetric ultrasound.

Ecker is a founding member of the Massachusetts Perinatal Quality Collaborative and is past president of the Obstetric Society of Boston. He currently serves as chair of the American College of Obstetricians and Gynecologists Committee on Obstetric Practice and is a member of both the Publication Committee of the Society of Maternal Fetal Medicine and the Obstetric Expert Panel for Leapfrog, a national quality measurement consortium. He also founded and has continued to serve as associate director of the MGH fellowship in Material Fetal Medicine.

Ecker succeeds Isaac Schiff, MD, who will remain active in the department, continuing to see patients and serving as a mentor.

"It is special to be asked to give back to a place and group of colleagues that have given me so much," says Ecker. "My job as I see it going forward is to do all I can to help all in our department and at our hospital in our collaborative efforts to lead in the medicine, science and teaching of women's health."

A STATELY EXHIBITION: Alger talks with fellow exhibitors at the MGH boo showcasing the Russell Museum

Showcasing the MGH Museum at the State House

THE PAUL S. RUSSELL, MD Museum of Medical History and Innovation was one of 28 institutions from across the state to exhibit in the Massachusetts State House's Great Hall as part of Massachusetts Museums Day.

Organized by the New England Museum Association, the Oct. 7 event aimed to advocate for legislators' support of museums and to educate lawmakers and other State House visitors about local museums' offerings. Senate President Stanley Rosenberg and State Sen. Eric Lesser read Gov. Charles Baker's proclamation for the day, which noted the role of museums in preserving and sharing the state's scientific and cultural heritage.

"You could feel the enthusiasm on the part of the legislators," says Sarah Alger, Russell Museum director. "It was a terrific opportunity for us to tell government staff and fellow museum professionals about the medical innovation we showcase."

In November, the museum will feature an exhibit on the 10th anniversary of *Proto*, an MGH-sponsored magazine about the latest issues and big ideas in medicine. On Nov. 3 at noon, *Proto* will co-sponsor a panel discussion about the end of life, including Pulitzer Prize-winning journalist Ellen Goodman; Julia Gallagher, MD, of MGH Palliative Care; and *Proto* writer Cathryn Delude. On Nov. 12 at 6 pm, the museum will co-sponsor a lecture with the Nichols House Museum about turn-of-the-century MGH physician Arthur Nichols, MD.

To register for a lecture or to sign up for the Russell Museum's email list, email *mghhistory@partners.org*. ■

— XOXOut Ovarian Cancer Fund

(Continued from page 1)

and Michael Birrer, MD, PhD, thanked the more than 100 donors for their support in providing resources specifically to develop a tool for the early detection of ovarian cancer. Eighty-five percent of women first diagnosed are already in the late stages of ovarian cancer. Even then, studies show that more than half of the patients do not receive the most effective treatment of abdominal chemotherapy. Birrer and del Carmen are optimistic that those statistics will change, promising that researchers are on the forefront of breakthrough developments in treatment for the disease.

Wedel's message in the evening's program book thanked her new advocates: "Through your generous support, we will wage war on this dreadful disease and we will bring hope to the cause. We do this for our daughters and for our granddaughters, and we will make a difference. xoxo – skw." ■

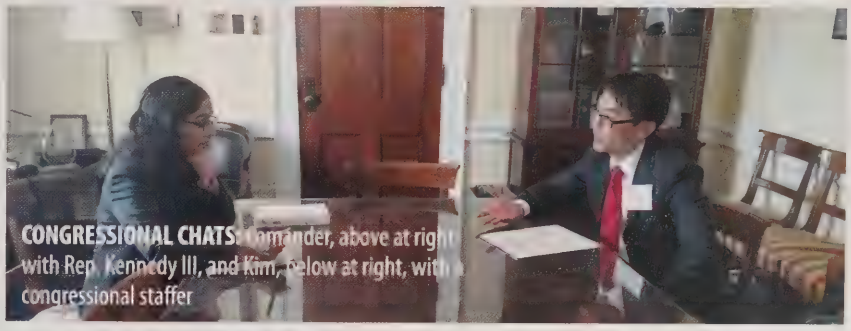
A visit to Congress for two emerging scientists

ON OCT. 7 AND 8, Jason Comander, MD, PhD, and Leo Kim, MD, PhD, of the MGH and Massachusetts Eye and Ear Infirmary, participated in the Alliance for Eye and Vision Research (AEVR) Emerging Vision Scientists Program. This initiative enables scientists to meet with members of Congress to discuss the importance of vision research in the continuing fight to prevent blindness.

Comander met with Rep. Joe Kennedy III, and Kim met with a congressional staffer for Rep. Michael E. Capuano, and both met with staff for Senators Elizabeth Warren and Ed Markey. In their discussions, they reaffirmed the importance of funding for National Institutes of Health (NIH)/National Eye Institute.

"It was a special moment to meet Rep. Joe Kennedy," says Comander. "In our conversation, he was thoughtful and practical, suggesting ways we could work together to achieve our common goal of robust, sustainable and predictable funding for the NIH. The congressional office was very welcoming to our ideas."

This program also allowed them to make invaluable connections with AEVR staff and with other emerging scientists from across the country. ■



CONGRESSIONAL CHATS: Comander, above at right with Rep. Kennedy III, and Kim, below at right, with a congressional staffer

GOODIES GALORE:
Glitter, goodies, and get-ups made for an exciting Halloween at MassGeneral Hospital *for* Children. On Oct. 29, Pediatric Hematology-Oncology Clinic and Proton Therapy Center patients and their siblings spent the afternoon participating in the annual Trick or Treat Halloween Parade through the Yawkey Center for Outpatient Care. Here Liam Stark, 2, Callie Zedower, 5, and Caden Zedower, 3, enjoy a stop along the route.

2016 benefits open enrollment

OPEN ENROLLMENT FOR 2016 employee benefits will take place from Nov. 2-24. Open enrollment is the only time of the year when MGH and MGPO employees can enroll in or change their benefits – other than retirement benefits – unless they experience a qualified life event. Open enrollment materials are available on the MGH Benefits home page, and employees can enroll using PeopleSoft benefits. Changes are effective Jan. 1.

New this year: If staff enroll in a 2016 Health Care or Dependent Care Flexible Spending Account (FSA), they can use an FSA debit card to pay for qualifying expenses and submit documentation via a mobile app from our new FSA vendor, Benefit Strategies. See the insert in the open enrollment packet for details.

For questions about benefits, call the Benefits Office at 617-726-8133 or email *ibenefits@partners.org*. Monthly paid professional staff (MDs and PhDs) can contact the Professional Staff Benefits Office at 617-726-9267 or email *prostaffbene@partners.org*.

Patient thrives after a ruptured aneurysm

JOAN NELSON, born partially blind, works full time at the State Library in Concord, New Hampshire. One day in February while eating lunch, she passed out with no warning, and her co-workers called 911. From the local hospital, she was immediately airlifted to the MGH to treat a ruptured brain aneurysm.

Because any procedure near Nelson's optic nerve could cause further loss of vision, James D. Rabinov, MD, interventional neuroradiologist, took a minimally invasive approach, with a catheter inserted in the groin to close the aneurysm with platinum coils. At 11 pm the same day, Rabinov called Joan's husband Steve to report that the procedure was a success.

During her initial 10 days in the Intensive Care Unit, Nelson underwent additional procedures to prevent vasospasm-related stroke. She then began intensive physical and cognitive therapy to re-learn how to walk and perform other tasks. "It was like trying to put your brain back together again," she recalls. She remembers not being able to run her computer or say Massachusetts General Hospital.

"I just took one day at a time and fought with everything I had," she says. "Then it all started coming back, like the brain healed."

In addition to Rabinov, Nelson received care from Aman B. Patel, MD, from Neurosurgery, Thabele M. Leslie-Mazwi, MD, from Neurology, and Joshua A. Hirsch, MD, from Interventional Neuroradiology.

"The team at the MGH is just outstanding," Nelson says. "I just can't say enough about their strength, kindness, dedication and the work they did. They not only took care of me, but also Steve and my guide dog William. They were unbelievable."

ALL THE WAY BACK: Aneurysm patient Joan Nelson, right, with Rabinov and her husband Steve

Within two months, Nelson was back at the library, where she continues to help meet the reading needs of blind people through a talking books program. "That is the beauty of the doctors at the MGH – they considered my quality of life. I might lose my vision someday, but we aren't taking that chance now. I have a full-time job, I love my work and I'm all the way back." ■

A warm welcome

PINS FOR PAS:
During October's Physician Assistant (PA) Recognition Week, the MGH honored its PAs with an evening reception at the Paul S. Russell, MD Museum of Medical History and Innovation. PAs work in several departments throughout the hospital and perform a comprehensive range of medical duties. On this occasion, the newest PAs were presented with a pin worn by all PAs at the hospital. Accepting her pin from Brit Nicholson, MD, senior vice president and chief medical officer, is Hayley Chestnut, PA-C, who began working in the Cardiac Surgery program in September.

EDITOR: Colleen Marshall Delaney • 617-726-0275 • **ASSISTANT EDITOR**: Colleen Keilty • 617-724-2753
EMAIL: *Hotline@partners.org* • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.

11.06.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

MGH physician honored by State Police

MARC DEMOYA, MD, is trained to be prepared for the unexpected. As an MGH trauma surgeon, he also is used to being part of difficult, oftentimes life-or-death situations. So when he came across a motor vehicle accident that involved serious injuries, DeMoya did not hesitate. He sprang into action.

His heroic efforts were recognized during a special ceremony on Oct. 18 at the Massachusetts State House, where he was honored with the Massachusetts State Police Lifesaving Award, established to recognize a civilian who undertakes significant actions in saving the life of another.

It was Dec. 23, 2014 and DeMoya was traveling with his wife and children on Route 90 in Charlton when traffic ground to a halt. Moments before, two tractor trailers and a car had been in a horrific accident. "I was eight or so cars behind it and when we came to a stop, I saw that a car had flipped over. It looked nearly flattened, like a pancake," says DeMoya. "I ran over and saw fuel coming out of one

(Continued on page 2)

Keep moving, it works!

ON THE FIFTH DAY of Sue Louisignau's recovery on Ellison 19 from tracheal resection surgery, she began to get bored with sitting all day and reading. Always an active person who skis, races and for years competed and trained horses, she needed a challenge. Louisignau remembered something she had seen online about a patient who walked two miles after this same surgery, so Louisignau decided she would start walking.

At 6:30 am on Aug. 23, Louisignau went to the nurses' station and asked, "So what's the record?" No walking record had been recognized on the floor, so Louisignau put her competitive nature into drive to create one.

"It's all about moving," Louisignau says. "Not just walking, but whatever kind of movement can be done.

(Continued on page 4)

AUGUST 23, 2015
A Walking Record was set for Ellison 19 and for
Massachusetts General Hospital by
a 66 yr. 10mo. old female patient who had no
food/drink for 6 days, her chin stitched to her chest,
walked 150 laps, 6 miles, over ten hours, pulling an IV
on Ellison 19 while she was recovering from surgery
KEEP MOVING..... IT WORKS!!!!

MOTIVATIONAL MEMENTO: Louisignau returned to Ellison 19 two days before Halloween to present her walking record plaque to the nursing staff.

Pediatric Gastroenterology pioneer honored with endowed chair

IT IS NOT UNUSUAL for MGH employees to enjoy long and distinguished careers. But for W. Allan Walker, MD, the nearly 50 years he has spent at the MGH also have resulted in seminal contributions to the field of pediatric gastroenterology and nutrition, including authorship of the textbook, "Walker's Gastrointestinal Disease," now in its fifth printing.

"Everyone in the field of pediatric gastroenterology and nutrition has been touched – in a very positive way – by Dr. Walker's career," said Ronald Kleinman, MD, physician-in-chief of MassGeneral Hospital *for* Children (MGH*f*C), at a reception to celebrate the creation of the W. A. Walker, MD Endowed Chair in Pediatric Gastroenterology and Nutrition. Some 100 colleagues, friends and family members attended the Oct. 8 event at the Paul S. Russell, MD Museum of Medical History and Innovation.

Peter L. Slavin, MD, MGH president, recognized Walker for his contributions to the field, including his long-term research into the prevention of necrotizing enterocolitis, an often-fatal disease that affects premature infants.

Slavin also acknowledged another "superb physician," Alessio Fasano, MD, the first incumbent of the Walker Chair. Fasano is chief of the Department of Pediatric Gastroenterology and Nutrition and director of the Center for Celiac Research and Treatment at MGH*f*C. "Alessio's efforts have contributed to enormous progress in raising awareness and improving understanding of celiac disease, a lifelong condition, and other gluten-related disorders," said Slavin.

The award will enable stable funding for Fasano to continue his research, which includes a long-term prospective study of infants to unravel the complex factors that contribute to the development of celiac disease.

REMARKABLE CONTRIBUTIONS: Fasano and Walker

Paul Lerou, MD, named chief of Neonatology

PAUL LEROU, MD, has been appointed chief of Neonatology and Newborn Medicine for MassGeneral Hospital *for* Children (MGH*f*C) effective Oct. 1. Lerou succeeds Jonathan Cronin, MD, who will remain a member of the MGH's clinical faculty in the Patty Ribakoff Newborn Intensive Care Unit.

"I am very grateful to Dr. Cronin for all that he's contributed to our newborn efforts over the past 12 years, and look forward to further enhancing these programs with Dr. Lerou," says Ronald E. Kleinman, MD, physician-in-chief of MGH*f*C. "We are delighted that Paul has joined us to lead our newborn programs. He is a superb clinician, dedicated and innovative scientist and a gifted administrator."

LEROU

Lerou received his medical degree from Jefferson Medical School and completed his residency and chief residency in Pediatrics at Boston Children's Hospital, followed by a clinical fellowship in the Harvard Neonatal-Perinatal Medicine Fellowship Program.

He completed postdoctoral training in the George Daley Laboratory at Boston Children's Hospital, during which time he studied stem cell biology. Lerou's research is focused on using stem cells to better understand how genetic disorders and prematurity affect a child's development over the course of his or her lifetime and to ultimately develop new treatment strategies.

"I am very honored to join the MGH and lead the Division of Neonatology," says Lerou. "I look forward to working with an exceptionally talented team at MGH*f*C to deliver state-of-the-art care for newborns and their families. Consistent with the MGH mission, we will also reaffirm our division's commitment to research and education aimed at improving the lives of babies in our community and beyond." ■

—*Physician honored*

(Continued from page 1)

of the trucks and I found a man who was partially ejected from the car. He was screaming. When I got to him, I saw that one of his legs was amputated at the knee and the other had an open tibia-fibula fracture."

According to State Police, "with disregard for his personal safety in the presence of a large fuel spill, Dr. DeMoya dragged the victim a safe distance from the crash, before rendering aid, including applying a tourniquet to the severely damaged and bleeding leg."

DeMoya recalls that earlier that week he had been teaching his children how to properly apply a tourniquet and he had placed one in his car in the event of an emergency. That night, however, they had been traveling in his wife's car. "You are limited in what you can do at an accident like that, so you can often feel helpless," DeMoya says. "But in this case, thankfully, the trooper gave me his tourniquet and the man survived."

During the ceremony, State Police thanked DeMoya for his "selfless actions in rendering medical attention that saved a life."

DeMoya credits all those who helped at the chaotic scene as playing a key role. "It's nice to be able to provide that helping hand," he says. "It clearly made a difference that we were able to provide the care the man needed at that exact moment." ■

Celebrating everyday heroes

THE EMPLOYEE DISABILITY RESOURCE GROUP (EDRG) hosted its third annual Breakfast of Champions Oct. 27, at which nominees for the EDRG Disability Champion Award were honored. This award recognizes employees who exhibit exemplary commitment to disability advocacy and strive to make a positive difference and impact on all those within the hospital. This year's award was presented to Joseph Crowley, senior manager of Police, Security and Outside Services.

Crowley wears many hats in his daily routines at the MGH. He not only is the manager for the Ambassadors Program and oversees the Police and Security Outside Bike Patrol Officers program but he also volunteers with the Inpatients and Common Areas Surveillance Rounds and the Council on Disability Awareness. In all of these roles, Crowley works to ensure the MGH is a safe and accessible environment for those with disabilities.

"Joe's contributions to disability advocacy go above and beyond the scope of regular duties," said Peter L. Slavin, MD, MGH president. "His devotion to the MGH Mission and Credo, sincere empathy and caring attitude make for a winning combination in assisting individuals who may need accessibility accommodation during their visit to the MGH."

The seven other nominees recognized at the breakfast were Susan Fergus, Maria Isabel Gonzalez, Benjamin Majewski, Jamie Micco, PhD, Charles Tsun-Zhi Pu, MD, Jennifer Scalia, RN, and Lisa Susser. They each were given a certificate of recognition from Slavin while excerpts of their nominations were read aloud.

"This morning we are here to celebrate our everyday heroes," said Slavin, "our own MGHers who go above and beyond to provide a welcoming environment for our colleagues and patients with disabilities while gently reminding us that disability is just one part of an individual's story." ■

BREAKFAST OF CHAMPIONS: Nominees who attended, from front left, Majewski, Pu, Crowley (award winner), Micco, Gonzalez, Susser and Fergus

A shot at the big screen

EVER WONDERED what it would be like to have a part in a big Hollywood movie? How about in a movie acting alongside Johnny Depp? One lucky MGH nurse recently did just that. Kathryn Beauchamp, RN, PICU clinical nurse specialist, had a small part in the movie "Black Mass," starring Depp as notorious Boston mobster James "Whitey" Bulger.

Beauchamp – who has worked at the MGH for 16 years – was initially asked to work on the film as a technical advisor for scenes that take place in a hospital. She was sent the script to review to make sure every detail was accurate and also worked with the set director and wardrobe staff to ensure all equipment and clothing were accurate for the year in which the scenes were set.

"I attended a big meeting with director Scott Cooper and everyone involved and shared my thoughts on a few wording changes to the script," says Beauchamp. "After chatting with Cooper for a bit he just turned to me and asked if I'd ever been in a movie. He gave me a small speaking part that he promised wouldn't get cut."

ROLLING OUT THE RED CARPET: Beauchamp, third from right, with [illegible] friends going to see Black Mass. They presented her with red roses and a red scarf for the "red carpet."

For one day in May 2014 Beauchamp became an actress. She had her own dressing room, received fittings, makeup and a lavish spread of food. In addition to making sure the hospital room was set up correctly, she also was able to watch the crew film the hospital scenes.

"It was a long but fun process. We filmed my one scene many times," says Beauchamp. "Everyone made it so easy. During one of the filming breaks Johnny came over to chat and said, 'You could be my nurse anytime.' I told him that I'm a pediatric nurse and he just smiled and said, 'I'm a child at heart.'"

And he demonstrated that during one break as he suddenly jumped into character as his popular character Captain Jack Sparrow, from the "Pirates of the Caribbean" movies to the delight of actor Luke Ryan, who plays Bulger's son in the movie, and his family.

Beauchamp says she loved talking with the crew members and learning so much about the behind-the-scenes of making a movie. The experience is one she is sure to never forget. "I was raised in a family that just loved movies, and they are still such a big part of my life. To be part of this was amazing. It was one of those defining life moments."

11.06.15

MGH HOTLINE

LEADING LADIES: Hathaway and Rimm at the Women in Leadership annual lecture

A joyful approach to leading

"WE NEED TO tap into what makes us passionate and purposeful in order to stay fueled and excited to get things done," Allison Rimm told managers and supervisors at the annual Women in Leadership event Oct. 29 in the Starr Conference Center. "There is no way you'll get anybody to follow you if you don't believe in yourself and your vision."

Rimm was the featured speaker at this year's lecture, "Mastering the Art of Influence," and she outlined her experiences with "influence" as an essential skill to career success. Rimm – the former senior vice president of Strategic Planning and Information Management at the MGH, who left to begin her own company, Allison Rimm & Associates – shared her expertise in strategic planning, management consulting and coaching to inspire individuals and leaders.

During the lecture, Rimm also emphasized joy as the key to good leadership, necessary to be able to influence others positively in order to accomplish goals. "We need to find what it is that touches people's heart and soul and motivates them to do what they want, and to do what you need them to," she said. "Good leadership is about creating relationships with people and establishing good rapport."

The event ended with a question-and-answer session, followed by a networking reception. Rimm's themes of positivity, believing in oneself and loving what one does emerged throughout her talk. As did, of course, finding joy in daily activities.

"Do a 'joy audit' throughout your days," says Rimm. "Is what you are doing bringing you joy? Whatever you do, be sure to inject a little joy in your day."

The lecture, moderated by Misty Hathaway, senior director for Specialized Services and Marketing, was hosted by the Women in Leadership Committee, a volunteer group of MGH managers focused on professional development of women at the MGH. ■

— Keep moving

(Continued from page 1)

I just needed this challenge for myself and thought, wouldn't it be nice to inspire others to get moving when in recovery."

Pulling her IV bag behind her, Louisignau walked laps around the floor. She walked 150 laps that day, equivalent to 6 miles. It took her 10 hours to complete the laps, walking for 2 miles, resting for about an hour, and so forth. Every six laps, she would reverse direction.

On Oct. 29, her 67th birthday, Louisignau returned to the MGH – fully recovered – for a follow-up appointment, and to present Ellison 19 with a plaque depicting her record:

AUGUST 23, 2015: A Walking record was set for Ellison 19 and for Massachusetts General Hospital by a 66 yr. 10 mo. old female patient who had no food/drink for 6 days, her chin stitched to her chest, walked 150 laps, 6 miles, over 10 hours, pulling an IV on Ellison 19 while she was recovering from surgery. KEEP MOVING ... IT WORKS!

"A few weeks ago, I would not have been able to have this conversation," says Louisignau. "But thanks to this phenomenal institution, Dr. Mattisen and the staff, I can be active again and breathe 100 percent. I just want others to see this plaque and be inspired during their own recovery as well. It's important to not only have a challenge but to have some fun." ■

Aiming to tackle heart disease

SUPERSTARS GET SCREENED: On Oct. 31, nearly 30 former National Football League (NFL) players – most of whom played for the New England Patriots – underwent screenings for heart disease and joint health in an effort to tackle cardiovascular illnesses and bring awareness to early intervention. The event at the Mass General/North Shore Center for Outpatient Care in Danvers was hosted in collaboration with the Living Heart Foundation program, which aims to call attention to heart disease and the specific cardiovascular challenges of athletes, especially those with large body mass. "It's a great program for former players that need this type of checkup," said Ronnie Lippett, 54, former New England Patriots cornerback pictured here getting his blood pressure taken. "You have to take care of yourself and we should definitely be getting this done." Testing included a blood draw, body composition analysis, blood pressure check, an electrocardiogram, echocardiogram, carotid ultrasound, dental evaluation and neurologic assessment. The Living Heart Foundation was founded by former NFL quarterback and heart surgeon Arthur "Archie" Roberts, MD, who hopes to shed light on cardiovascular risks among athletes.

MASSACHUSETTS GENERAL HOSPITAL

EDITOR: Colleen Marshall Delaney • 617-726-0275 • **ASSISTANT EDITOR:** Colleen Kelly • 617-724-2753
EMAIL: Hotline@partners.org • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.

11.12.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

The gift of healing

ON DEC. 31, 2014, when world-renowned pianist Menahem Pressler stepped off the stage after performing with the Berlin Philharmonic, he didn't realize the pain in his left side could kill him.

Eight days later, at the MGH, the 91-year-old underwent a relatively rare procedure to repair a life-threatening aneurysm in his thoracic aorta. He had been referred to vascular surgeon Virendra Patel, MD, MPH, after surgeons in Indianapolis, Indiana, told him traditional open heart surgery was too risky.

In recent years, Patel has initiated a new procedure known as a fenestrated thoracic endovascular aortic stent graft (f-TEVAR), a less invasive option for patients with thoracoabdominal aneurysms who are not considered strong enough to endure the stress of open surgery. Patel is one of only a handful of U.S. doctors performing these very precise grafting procedures and one of a few surgeons worldwide who can perform both open and endovascular thoracoabdominal aortic aneurysm repair.

MEDICAL MELODIES: Patel, left, shows Pressler 3-D images from his CAT scan.

"The thoracoabdominal aorta has been a no man's land for stent grafts except in rare cases," Patel says. "That's partly because the stents simply haven't been commercially available to deal with the complex anatomy of this region. We need to do more clinical testing on the long-term patient outcome from this type of procedure versus open surgery."

Once the decision is made to use the new procedure, Patel customizes a commercially available stent to fit the individual. After a CT scan identifies the

(Continued on page 2)

A DAY OF THANKS: Temple receives an award from Angela Wynder, RN, of MGH Case Management.

Honoring those who serve

"THIS IS A DAY that the whole country says, 'Thank you.'"

Massachusetts National Guard Lt. Col. John Rodolico, PhD, senior clinical director of the Red Sox Foundation and MGH Home Base Program, paused during his welcoming remarks at the annual MGH Veterans Day Appreciation Breakfast. "How many of you are Vietnam veterans?" Rodolico, who served in Iraq, asked those in attendance. "When I came home for the second time – when we landed, there was a line of Vietnam veterans who were the first ones to welcome me. I want to thank everyone here, but I want to personally thank you for your service."

During the Nov. 11 ceremony at the Paul S. Russell, MD Museum of Medical History and Innovation, keynote speaker and Vietnam veteran Steve Temple, a carpenter in the MGH Buildings and Grounds Department, introduced a new employee group called MGH Military Veteran Partners (MVP). The group was formed to serve and support the hospital's active duty, reserve and former military and service member employees, as well as their families and the external veteran community. Temple says the group – open to all MGH employees – hopes to plan activities and events throughout the year that support the veteran community, recruit veterans for employment at the MGH, and offer outreach and support to veterans and their families in need.

(Continued on page 4)

eCare Corner

Toolkit features helpful materials for eCare launch

Partners eCare is a Partnerswide initiative to implement Epic, the electronic health record and administrative system at each hospital and affiliated health care site. The single electronic medical record will allow a patient's health-related information to be shared among authorized clinicians and staff from anywhere within the Partners network.

THE MGH HAS CREATED an informative toolkit page on the Partners *e*Care website at *http://partnersecare.partners.org*, which includes timelines, fact sheets and educational videos to help prepare staff for the system launch. In addition, the MGH has introduced a new workbook to guide directors and managers through the upcoming Partners *e*Care implementation process, beginning with the Ambulatory Wave 1 go-live.

Many managers have asked, "How can I navigate myself and my staff successfully through the implementation?" The workbook answers this question with a readiness worksheet that will help managers keep their teams organized and understand the steps needed to ensure a successful go-live. The worksheet covers milestones to check off between now and January within training, operational readiness and communications.

While the workbook is geared toward managers and directors, the toolkit also includes FAQs and fact sheets that can be used by all end users and slides from the Wave 1 Organization Readiness Kick-Off Session. Staff in future waves also are encouraged to review these materials to better familiarize themselves with the processes involved in implementation. ■

Clinical Research Day focuses on translational medicine

THE 13TH ANNUAL MGH CLINICAL RESEARCH DAY on Oct. 8 focused on the challenges of translating research discoveries into drugs, devices and procedures that address disease and improve the health of patients. The day began with the keynote speech by Mark Fishman, MD, president of the Novartis Institutes for Biomedical Research and former head of MGH Cardiology and founder of the Cardiovascular Research Center. After acknowledging that both Novartis and the MGH share the goal of changing the practice of medicine, he cited several of his company's most promising projects and presented three important hints for clinical researchers: be ambitious in choosing fields in which a major impact can be made, such as the challenges of aging; bring discoveries into clinical investigation as quickly as possible, since animal studies may not predict results in humans; and be prepared for what comes next. Fishman challenged his audience to be leaders in defining the full spectrum of a disease, from the molecular basis to the impact on patients. "MGH is so ideally suited with its great breadth of talent both in the basic and the clinical arenas, I don't think there will be another institution that can beat you."

POWERFUL POSTERS: Jasmin Mahabamunuge, right, of the Infectious Disease Unit, discusses her poster.

After the annual poster session, featuring presentations from 322 research teams, the panel discussion addressed "How to Think About Innovation and Translation at MGH." Merit Cudkowicz, MD, chief of Neurology, described how her department brings clinicians and scientists together by arranging for each PhD researcher to affiliate with at least one clinical division. Mason Freeman, MD, director of the Translational Research Center, described how the center has evolved into the new, 18-bed facility being constructed on White 12 and noted that the biggest challenge for industry in working with MGH investigators is navigating our process, something that his team is working to streamline.

During the discussion, Henri Termeer, an MGH trustee and retired president of Genzyme, stressed that companies wishing to develop new treatments have a key disadvantage – lack of access to patients. "They look at you here at MGH and wish they were here," he said. "I can't tell you how incredibly powerful what you do is."

—*The gift of healing*

(Continued from page 1)

exact location and size of the aneurysm, Patel makes a series of precise measurements to ensure the stent fits properly within the aorta. It must contain the aneurysm and prevent rupture, but also include openings (fenestrations) to let the aorta branch into the body's other arteries.

While the procedure is technically exacting, Pressler was struck by how sensitive Patel was to his desire to get back to the piano.

"Dr. Patel not only cares for but cares about his patients," Pressler says. "He operates with love, with knowledge, and with a sense of confidence that he will succeed. He showed so much joy at my recovery."

Pressler's determination to remain active, along with a very strong family support system, made a critical difference in his recovery, Patel says.

Until the graft procedure, Pressler had been an active concert pianist and teacher, flying around the world to perform with orchestras, chamber ensembles and as a soloist. During his more than 50-year tenure with the Beaux Arts Trio, he recorded nearly the entire piano chamber music repertoire and has been lauded for his remarkably expressive approach to music.

Less than six months after his graft, Pressler performed an entirely new repertoire in London, and he has continued to perform and lead master classes internationally.

"For me, to be able to continue the way of life I love – to be an artist and perform – is such a gift," Pressler says. "God gave me the gift of music, and he gave Dr. Patel the gift of healing. The world is a better place for having a man like him in it."

VIETNAM: 50 YEARS LATER

MGH School of Nursing grads share stories of serving on the front lines

STRENGTH AND COURAGE: From left, McCarthy, Nemeskal, Goral and Long

SHEILA EDMONDS LONG, a 1965 graduate of the MGH School of Nursing, arrived at the 85th Evacuation Hospital in Qui Nhon, Vietnam in July 1966, a young girl in her 20s fresh out of school. "I just looked down at the two open wards with hundreds of beds and thought, 'Oh, my God, this is war.'"

LONG

Long was joined by three other MGH School of Nursing graduates at the school's Continuing Education Day Sept. 25, part of the MGH Nurses' Alumnae Association's effort to preserve nursing history with an oral history project. It has been 50 years since the start of the Vietnam conflict – and the event marked the first time any of the women had shared their stories at the MGH.

"What were we thinking? Why did I do this?" reflected Roberta Nemeskal, MGH School of Nursing class of 1969, who served in the U.S. Army Corps from 1969-1970. She spent one year at Walter Reed Army Hospital in Washington, D.C. treating injured soldiers, then a year at McAfee Army Hospital in New Mexico. "War was very real in 1968 when we signed up. It seemed like the right thing to do as an MGH grad. But we were just children. We were children taking care of children."

And they practically were. The average age of an American soldier serving in Vietnam was 19. And most of the nurses there were in their early 20s. If a woman wanted to join the Army in 1968 and she was under the age of 21, she needed her parents' signature granting permission to join.

NEMESKAL

"Every night we would be home watching TV and war would be right in your face. One night I had an epiphany and just said, 'This is what I need to do,'" says Barbara Teixeira Goral, MGH School of Nursing class of 1967, who served in the 12th Evacuation Hospital in Cu Chi, Vietnam from 1968-1969.

Because of her MGH training, Goral was made charge nurse immediately upon her arrival, though she continually tried to transfer. "Physiologically I could not see many more people die or more horrific wounds," says Goral. "But they wouldn't transfer me because no one else had the training that I did. I never would have been able to function in that capacity had I not had the great training as I did at the MGH."

GORAL

Burns were the specialty of the hospital, and Goral recalls them being horrific. She worked 12- to 14-hour shifts without a day off for six months, which took a huge toll both physically and mentally. She often worked wearing a flak jacket because of incoming fire. Goral says after a while she wouldn't take cover, she simply worked through it. Despite the difficulties of war, Goral remained strong. "I had to divorce myself from the politics of the war. The fact of the matter was American soldiers were dying over there and they needed our help. I had something to offer and the Army was my way to do it."

MCCARTHY

Jane McCarthy, MGH School of Nursing class of 1969, says she – like Goral, Nemeskal and Long – did not believe in the politics of the war, but still she wanted to serve. She recalls when she and Nemeskal arrived at the intensive care unit at the Walter Reed Army Hospital, they immediately were recognized by the chief nurse as "the girls from Boston and the MGH. We've been so looking forward to getting you." And just like that, they were Army nurses.

(Continued on page 4)

MGH offers backup child care

SCHOOLS CLOSE for vacation, caregivers get sick or are suddenly unavailable, different hours may be required at work. The unexpected happens daily, making it necessary for some parents to find supplemental child care. Fortunately, the MGH has a Backup Childcare Center for those times of need.

Patricia Pirone, director of the MGH Backup Childcare Center, recently shared updates, as well as reminders and important information for parents. The Backup Center is available to MGH employees and patients, for children from 2 months old to 12 years. Having 2-month-olds at the center is a recent policy addition that has been well received. Because infant care can be quite specialized, Pirone says, tours of the infant and toddler care spaces are offered to support families in their transition to using the center.

The center can care for up to 24 children per day, and it is available for families to use 20 days each year. Pirone says parents can book a spot up to one month in advance.

"I really recommend checking our website for information and completing forms prior to coming in to be as prepared as possible," says Pirone. "It can get stressful if you have to do everything at the last minute."

The main message Pirone stresses to parents is to call ahead and be patient, especially during the summer and school vacation weeks. "There are definitely times of year when it is almost always full here. We work with families as much as possible to be of assistance. If we are booked one day, do try again. We are here to help."

For more information about reservations and cost, call 617-724-7100 or visit *www.partners.org/For-Employees/Childcare/Backup-Childcare.aspx*.

PLAYFUL POTIONS: Dylan Mulgrew, 3, creates scientific concoctions.

— *Nurses in Vietnam*

(Continued from page 3)

In 1970, McCarthy was sent to the 95th Evacuation Hospital in DaNang, South Vietnam. "I just didn't think I had the strength to survive Vietnam," McCarthy says. "There is a very high cost to war; the devastation of a country and the killing of its people. But it didn't put me in conflict with being there and taking care of soldiers."

Returning home to the U.S. after their service was not much easier. "Transitioning to civilian nursing was a nightmare," recalls Long. "I was intolerant of people sitting or not moving fast. We didn't talk about the war with anybody; primarily it seemed no one even cared."

The same was true when Nemeskal returned home. To this day, she says, her siblings have never asked about her time in the service. "It was like bad words or something; you just didn't talk about it."

As McCarthy stood in the airport to return home, she completely fell apart. "I saw all these people around me in civilian clothes, and all I could think was 'Don't you know there's a war going on?'" After sleepless nights and nightmares about being back in Vietnam, McCarthy went back to college to earn her degree, and continues to be an advocate for veterans. "We will continue to reach out to other veterans," says McCarthy. "Because – although we always remember the high cost of war – we survived. And we have gone on with our lives."

Although for the past 50 years sharing their stories was something that was not done, these four MGH School of Nursing graduates touched the entire audience with tales of their courage and bravery.

"I just thank you for sharing your profound stories," said one audience member. "And I thank you for what you've done. You are our true heroes." ■

— *Veterans*

(Continued from page 1)

"Our goal is to create a large army of people willing to come together to help our veterans. I'm asking you to consider joining this different kind of army – an army of caring and an army of kindness," Temple said. "It's what we already do here at the MGH and if we get a lot of people we can accomplish a great deal. We cannot forget the sacrifices and the needs of so many of our comrades."

Following his remarks, Temple was presented with a "Certificate of Awesomeness" and it was announced that a special scholarship had been created in his honor. The MGH MVP Temple Scholarship will be granted to a veteran/student who is studying the trade arts.

"I think the Home Base slogan really says it all," Temple said. 'Their mission is complete. Ours has just begun.'"

The MGH MVP group will host a general meeting from 3-4:30 pm on Nov. 17 in the Thier Conference Room. For more information, email *MGHVetpartners@partners.org*. The group is open to all employees, and no prior military service is necessary. ■

MASSACHUSETTS GENERAL HOSPITAL

EDITOR: Colleen Marshall Delaney • 617-726-0275 • **ASSISTANT EDITOR**: Colleen Keilty • 617-724-2753
EMAIL: *Hotline@partners.org* • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.

11.20.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Partners Biobank plays key role in research

SEKAR KATHIRESAN, MD, medical director for the Cardiology Division, and his team of investigators – led by cardiologist Pradeep Natarajan, MD, and research coordinator Erina Kii in the Center for Human Genetic Research – are looking for a needle in a haystack.

The team is trying to locate patients with one dysfunctional strain of a specific gene, APOC3, which affects about 1 in 150 people. Through his lab's research, Kathiresan has found that people with this gene variant are naturally protected against heart disease and the team believes studying these individuals could have a tremendous impact on how heart disease is treated in the future.

DEDICATED TEAM: Kii and Natarajan

The group turned to the Partners Biobank – a resource that gives researchers access to local patient populations with a wide range of genetic variations. The large-scale repository houses blood samples and health information from more than 32,000 Partners patients who consented to have their data and samples used in studies to help personalize and improve health care. The proximity of most patients to the MGH makes it easy for investigators to call in participants for a specific functional study.

"Having this resource and access to a local population is key to answering some of the questions about how this gene variation works to block or lower triglycerides in humans," Natajan says.

(Continued on page 4)

LIKE FAMILY: Morgan and Ennis during a recent celebration of Morgan's continued health

A second chance

IT'S NOT EVERY DAY you get a second lease on life. Emma Morgan, however, received that second chance 10 years ago thanks to a procedure performed by the MGH Heart Failure and Cardiac Transplant Program. At the age of 72, Morgan was the first patient in New England to undergo a clinical trial for a new treatment for patients with advanced-stage heart failure. The treatment included Morgan being implanted with a new device, called HeartMate II, that was seven times smaller than similar devices on the market. It was implanted next to Morgan's heart where it began pumping up to 10 liters of blood per minute – covering the full output of what her heart could do when it was healthy.

"The pump is good, but with your good care – along with my family's support, especially my husband of 55 years – we're here," said Morgan during a gathering to celebrate the anniversary of her successful implantation.

Since her treatment, the Hudson, Massachusetts resident has seen her family grow, welcoming four grandchildren, and also adopting her MGH Mechanical Circulatory Support Program caregivers. Morgan and her husband John make regular trips to the hospital for checkups, and she stays abreast of the care team's lives.

"Emma has become part of my family over the last 10 years," says Stephanie Ennis, NP. "She has become another grandmother to my children and is a favorite patient to our whole team. She schedules her appointments to ensure she sees us around the holidays to spoil the staff and our kids with gifts."

The Nov. 5 celebration in the Blake 8 Buckley Conference Room brought together

(Continued on page 2)

Shedding light on lung cancer screening

NOVEMBER IS LUNG CANCER AWARENESS MONTH and Jo-Anne Shepard, MD, Director of MGH Thoracic Imaging and Intervention, would like to share important information about the only lung cancer screening test proven to decrease mortality from this devastating illness.

What is the lung cancer screening test?

Lung cancer can be detected using a low-dose chest CT scan, a procedure that has the potential to identify lung cancer at an early stage when treatment is most beneficial. By using low-dose CT, mortality from lung cancer can be decreased. The U.S. Preventative Services Task Force made lung cancer screening with low-dose CT a public health recommendation in 2013. This independent panel of experts reviews evidence of the effectiveness of clinical preventive services and develops recommendations for those services. The MGH has been offering the low-dose CT scan for many years, but it wasn't until February 2015 that the procedure was covered by insurance companies for eligible patients.

How does this test work?

There is no preparation necessary for the scan. All a patient has to do is remove any jewelry, lie on a CT scanner table and take a deep breath for a few seconds. The entire process takes about 15 minutes.

Who should get screened?

Eligible patients include current smokers or former smokers who have quit in the past 15 years, are between 55- to 77-years-old and who have a 30 pack-year or greater history of smoking. A pack-year is calculated by multiplying the number of packs of cigarettes smoked per day by the number of years smoked. Patients have to be asymptomatic and be able and willing to tolerate treatment if lung cancer is discovered.

Patients who meet eligibility criteria, or those who want to find out if they are eligible, should speak with their primary care physician or provider. The clinician will discuss smoking cessation and the risks and benefits of this procedure in a shared decision-making visit, including the need for follow-up testing, the risks of over-diagnosis, false positive rates and total radiation exposure.

Why is lung cancer screening important?

This is the only screening test for lung cancer that has been shown to decrease mortality because of its potential to identify the disease at an early stage. Lung cancer may be cured if it's discovered early, before symptoms occur.

What is a positive finding?

A positive finding is a nodule in the lung that measures 6 millimeters or greater. Smaller nodules are considered to have a very low likelihood of being a clinically active cancer. It is recommended that patients who have no nodules or very small nodules return in one year for an annual screening scan as long as they meet eligibility criteria. The larger the nodule, the more concerning it is for potential lung cancer. The dedicated thoracic radiologists – who are highly experienced in detecting and managing pulmonary nodules including lung cancers – utilize nationally accepted follow-up recommendations based on the size and level of concern for lung cancer. In the most suspicious cases, a radiologist may recommend specialty consultation, further imaging or potentially a biopsy. Your doctor may contact you to discuss recommendations for next steps if needed.

If you are a current smoker, the best action that you can take to reduce your risk of lung cancer is to stop smoking. It is more effective than any test to reduce your risk. Call the Massachusetts Smokers' Helpline (free and confidential) at 1-800-QUIT-NOW (800-784-8669).

FESTIVAL OF LIGHTS: Employees gathered in the East Garden Room Nov. 12 to join in the annual Diwali celebration, hosted by MGH Human Resources. The five-day festival is celebrated by people of all faiths and is a traditional festival in Hinduism, Jainism and Sikhism. Also known as the festival of lights, it is the largest and most important holiday in India.

— Second chance

(Continued from page 1)

this extended family to celebrate Morgan's continued health, a rarity for patients with left ventricular-assisted devices. When Morgan had her device implanted, there were less than 500 patients living with this technology. Over the last decade that number has grown to more than 10,000 patients implanted for both bridge-to-transplant and destination therapy. Morgan is one of the longest surviving individuals to undergo a left ventricular- assist device procedure, which has now been FDA approved. In fact, she has not been hospitalized in more than two years.

"We have come a long way. We had problems in the beginning, but overcame them as a team," said John. "The last 10 years have been good years. All our kids were young when Emma got sick, but she was able to see them grow up, get out of high school and go on to college – which is more than what we expected."

David D'Alessandro, MD, surgical director of the Heart Transplantation and Ventricular Devices program, also spoke at the celebration. "Patients like you had to trust us and we took th leap of faith together, studying this technology for the hopeful benefit of you and future patients. We have been inspired by you bravery, which has contributed to major progress in our ability t treat patients with advanced heart failure."

Said Morgan's surgeon Tom MacGillivray, MD, co-director of the Thoracic Aortic Center, "When I first met Ms. Morgan, I was most impressed by two things: the severity of her heart failure and her wonderful family. Over the last 10 years, it has been so gratifying to see the quality of her life be transformed by her device. Emma is now a vital member of our MGH family."

New debit card, app will make Flexible Spending Accounts more user-friendly

OPEN ENROLLMENT for 2016 health and wellness benefits continues through Nov. 24. Don't miss the chance to enroll in benefits programs that will meet your family's needs in 2016.

MGH's Flexible Spending Accounts (FSA) will offer two new, convenient features in 2016: a debit card that can be used to pay directly for eligible expenses, and a mobile app that allows FSA subscribers to scan receipts and other FSA documentation with their smart phones. Both services will be provided by Benefit Strategies.

"If you have never enrolled in a Flexible Spending Account before, now is the time," says Jeff Davis, senior vice president for Human Resources. "Flexible Spending Accounts are terrific tools that make it possible for our employees to pay for items they are already purchasing using pre-tax dollars. For many, the savings can be substantial."

Those who enroll for Health Care or Dependent Care FSAs for 2016 will receive a debit card that they can use to pay directly for eligible expenses. The amount of each purchase will be deducted automatically from their pre-determined savings amount. In many cases, the card will eliminate the need to submit documentation, but it does not eliminate the need to keep it. The IRS requires you keep all original documentation for purchases associated with the debit card, and in some instances you will be required to substantiate a claim with Benefit Strategies.

The Benefit Strategies mobile app also can help to keep track of FSA spending and access account information on the go. It also will allow employees to use their mobile device to photograph and upload receipts and other required documentation when necessary. To take advantage of these convenient new options, employees must enroll in a Health Care or Dependent Care FSA for 2016. Even if employees have a 2015 FSA, they must re-enroll to participate in 2016.

Benefits-eligible employees can enroll in an FSA through PeopleSoft eBenefits before Open Enrollment ends on Nov. 24. Those who sign up for an FSA will receive information from Benefit Strategies in December about how to set up their Benefit Strategies account and download the mobile app. Debit cards should arrive at home addresses in late December.

"These new options make our Flexible Spending Accounts much easier to navigate. If the scanning and the paperwork have discouraged you from taking advantage of this program before, I'd urge you to reconsider," says Davis.

A flyer with more details about the Flexible Spending programs available to MGH employees was sent to home addresses as part of the Open Enrollment packet. Copies of these materials can be found at *http://hr.partners.org/mgh/benefits.aspx.*

MGH employees with questions about the 2016 Flexible Spending Accounts can contact Benefit Strategies at 1-888-401-FLEX (3539). ■

What can you pay for with flexible spending accounts?

Health Care Accounts can be used for the following:

- Co-pays, deductibles, ambulance fees, laboratory fees, X-rays
- Bandages, diabetic supplies
- Dental care
- Eye exams, eyeglasses, contact lenses, saline solutions, laser vision correction surgery
- Chiropractic care, acupuncture
- Smoking cessation programs
- Mileage to and from medical appointments
- Massage therapy

Dependent Care Accounts can be used for the following:

- Before and after school care
- Nanny/au pair services
- Day camp
- Late pick up fees
- Preschool tuition
- Babysitters (in and out of home)
- Childcare centers
- Caregivers for disabled dependents
- Adult day care/elder day care

Dedicated donors honored

TWENTY PINTS. That's the amount of blood Bill Stilwell estimates he's donated in the last four years since joining the MGH Materials Management Department.

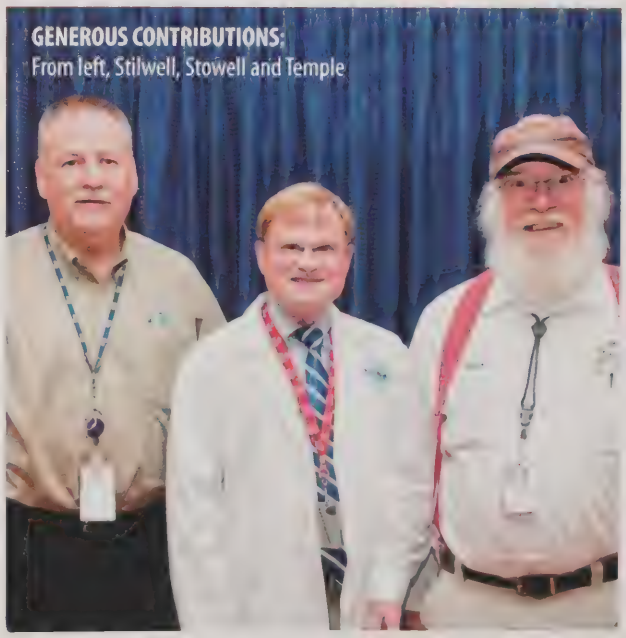
"I started donating back in college in the 70s, so it's been close to 40 years," Stilwell says. "I keep a card at my desk so I know when I'm eligible and I donate the maximum six times a year."

Stilwell was honored as the top employee whole blood donor by the MGH Blood Donor Center during its annual Appreciation Breakfast Nov. 13 in the Thier Conference Room. Steve Temple, of MGH Buildings and Grounds, was recognized as the year's top platelet donor.

"When I found out what platelets are used for and how much they help cancer patients, it became a no-brainer to donate," Temple said. "I've done it every two weeks ever since, more than 200 times."

Christopher Stowell, MD, PhD, director of the Blood Transfusion Service, thanked the donors in attendance for their support, noting that employee donations make up 16 percent of the center's collections. "When I first came here, I could count the number of employee donors on one or two hands, so this really is substantial," Stowell said. "We are here today to thank you – but the real thank you comes from the patients who benefit. They can't thank you directly so we are here today on their behalf. We rely upon you and we appreciate your generous contributions."

For more information about the MGH Blood Donor Center, or to make an appointment, call 617-726-8177. ■



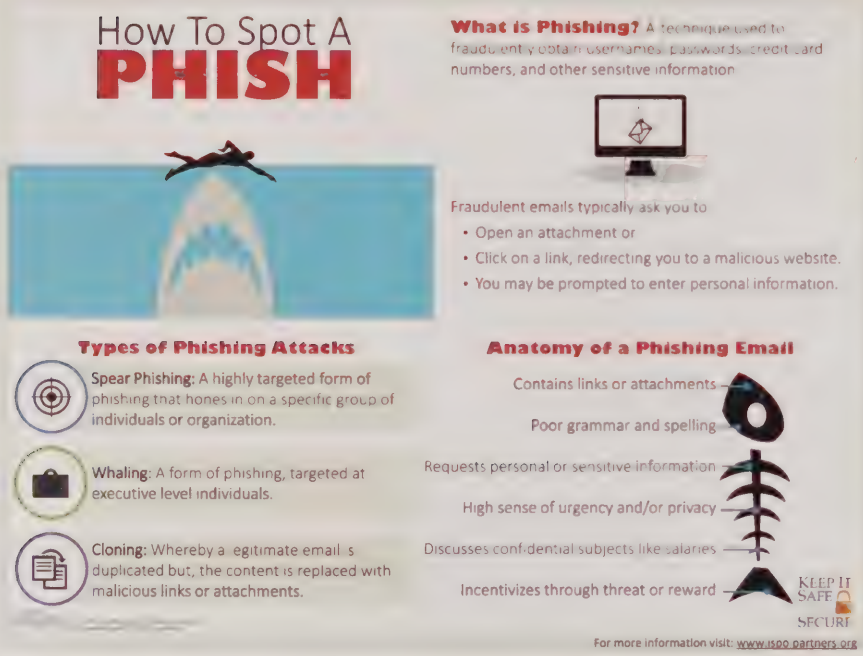
GENEROUS CONTRIBUTIONS: From left, Stilwell, Stowell and Temple

How to identify phishing emails

HAVE YOU EVER received an email from Partners IT or Human Resources that seemed to be too good to be true? Maybe it was about a laptop giveaway or a bump in your paycheck. Watch out – these types of emails are phishing attempts. In today's world, a "phish" can appear as a legitimate communication from a trusted source, like Partners. It is everyone's job to stay alert when looking through the hundreds of emails that we receive every day. We all have the potential to be targeted; no one is immune to a phishing attack.

How can I protect myself?

- Limit the amount of personal information you provide on the internet.
- Use extra caution on mobile devices, as it may be harder to spot discrepancies.
- Do not respond to requests for personal or financial information through email.
- Use different passwords for personal and business accounts.
- Use a second method of contact to verify requests made over email.
- When in doubt, do not click or open the email. Everyone has the potential to be targeted, and no one is immune to a phishing attack. If you believe you've received a phishing email, do not open the message. Please highlight the suspicious message in your Inbox. From the top tool bar in Outlook, select "Actions" then "Forward as Attachment." Send the message to *nospam@partners.org*.


How To Spot A
PHISH
What is Phishing? A technique used to fraudulently obtain usernames, passwords, credit card numbers, and other sensitive information
Fraudulent emails typically ask you to
• Open an attachment or
• Click on a link, redirecting you to a malicious website.
• You may be prompted to enter personal information.
Types of Phishing Attacks
Spear Phishing: A highly targeted form of phishing that hones in on a specific group of individuals or organization.
Whaling: A form of phishing, targeted at executive level individuals.
Cloning: Whereby a legitimate email is duplicated but, the content is replaced with malicious links or attachments.
Anatomy of a Phishing Email
Contains links or attachments
Poor grammar and spelling
Requests personal or sensitive information
High sense of urgency and/or privacy
Discusses confidential subjects like salaries
Incentivizes through threat or reward
KEEP IT SAFE SECURE
For more information visit: www.ispo.partners.org

Home run at MassGeneral Hospital *for* Children

MONSTER SIZE GIFT: Boston Red Sox star David Ortiz put a smile on the faces of several MassGeneral Hospital *for* Children (MGH*f*C) patients after a special visit to the inpatient floors on Nov. 12. Ortiz, here with "Mighty Matthew" Cech, 11, spent time with patients and their families and signed dozens of autographs. Ortiz also presented the MGH*f*C Pediatric Emergency Department with a generous donation of $100,000 and unveiled a special room in the ED adorned with baseball decorations. The room was subsidized by the David Ortiz Children's Fund, which aims to help children in New England and the Dominican Republic who do not have access to the critical pediatric care they need.

— *Biobank*

(Continued from page 1)

Initial observations showed people with the dysfunctional APOC3 gene variant also had a low level of triglycerides – a type of unhealthy fat that circulates in the blood. Elevated levels have been shown to increase the risk of heart disease and heart attack.

By studying patients that have these naturally low triglyceride levels due to the APOC3 defect, the team hopes to develop an inhibitor that will mirror the effect in other patients as well.

After looking through the 5,000 samples that have recently been genotyped and released to researchers from the Partners Biobank, Natarajan was able to identify four individuals that have this disrupted APOC3 gene. He hopes to locate a total of 20 individuals with the dysfunctional gene and 20 control participants, or those who do not have the gene, to advance his study.

"It is possible to work with collaborators globally and have access to blood and potentially tissue samples," Natarajan says. "It is, however, the local Partners Biobank that gives our team access to actual patients based on specific genotypes."

MASSACHUSETTS GENERAL HOSPITAL

EDITOR: Colleen Marshall Delaney • 617-726-0275 • **ASSISTANT EDITOR**: Colleen Keilty • 617-724-2753
EMAIL: *Hotline@partners.org* • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.

12.04.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Commitment to safety: Boston MedFlight debuts new GPS approach

IN A MEDICAL EMERGENCY, every second counts. In the past, a Boston MedFlight helicopter transporting a patient to the MGH on a cloudy or rainy day would land at Logan or Bedford airport and then transport the patient to the hospital in an ambulance. Now there's a quicker way.

Pilots use one of two methods in airspace to guide their flight paths – either visual guidance or instrument navigation. Medical flights coming to Boston have always been able to land on hospital helipads in good weather using visual guidance. Boston MedFlight can now use GPS technology and instrument approach procedures to safely land at Boston hospital helipads in inclement weather, such as cloudiness or rain.

"The major benefit of these instrument approaches is they allow us a higher safety margin," says Rick Kenin, general manager for aviation operations at Boston MedFlight. "Helicopters need to see the ground in order to land. Now, in cloudy conditions, our helicopters can use instrument approach procedures to land at one of five downtown Boston hospital helipads directly."

The MGH is one of the hospitals now certified by the Federal Aviation Administration (FAA) for instrument approach procedures, allowing helicopters to land and depart from specific hospitals under marginal weather conditions, along with Beth Israel Deaconess Hospital, Brigham and Women's Hospital, Boston Medical Center and Tufts Medical Center.

"The unique challenge for MedFlight navigation in Boston is the close proximity to Logan International airport – which necessitates a lot of safety restrictions – and all the tall buildings downtown," says Kenin. After

(Continued on page 3)

A GROUP CHAT: Lillemoe listens to patients during group discussions at the pancreatic surgery symposium.

Understanding life after pancreatic surgery

THIRTY-SIX FORMER MGH patients, ranging in age from 35 to 81, recently returned to the hospital for the inaugural pancreatic surgery patient symposium, "Through Patients' Eyes: Understanding Life After Pancreatic Surgery." Each had undergone a pancreaticoduodenectomy – more commonly known as a Whipple procedure – from as recently as one month to up to 22 years ago.

The Oct. 31 event, hosted by the MGH Pancreatic Surgery Group in the Department of Surgery, provided a chance for patients, along with their loved ones and caregivers, to reconnect with their surgeons and discuss their postoperative recovery. The patients at the event had Whipple procedures not only for pancreatic cancer, but also for other indications, both benign and malignant.

"The Whipple operation offers the only potential cure for pancreatic cancer, but its aftermath carries a price," says Andrew Warshaw, MD, emeritus chief of Surgery. "Recovery from the operation may be difficult and prolonged. As surgeons we want now to focus on the outcome of our treatment from the patient's point of view. What can we surgeons learn from our patients to support them better during recovery and to improve their lives in after-years?"

After welcoming speeches, patients and caregivers were split into four groups for discussions led by MGH surgeons. Leading the discussions were Warshaw; Carlos Fernandez-del Castillo, MD, director of the Pancreas and Biliary Surgery Program;

(Continued on page 4)

Visit the new *massgeneral.org*

THE MGH MARKETING DEPARTMENT recently launched the redesigned website, *www.massgeneral.org*. The site features enhanced designs, technology, navigation and search functionality for an improved user experience.

The Marketing team interviewed dozens of hospital stakeholders, analyzed website data and surveyed site users through online and in-person meetings to inform the new site's information architecture and design.

More than 100 clinical and research departments have an updated web presence on the new site. View the list of all clinical departments and centers at *www.massgeneral.org/viewall*.

The site's updated Find-a-Doctor search tool now offers patients and referring providers the option to search by doctor clinical interest or name, or by specialty, location, language and gender. Explore the tool at *www.massgeneral.org/doctors*. Visitors to the site should be aware that the Find-a-Doctor and search functions were built for Internet Explorer 11, and cannot run in Internet Explorer 8.

The MGH site will continue to evolve based on usability testing and additional feedback from site visitors and hospital staff. Feedback or questions about the redesigned website can be sent to *teamsite@partners.org*.

Wellman Center celebrates 40th anniversary

MORE THAN 40 YEARS AGO, a gift from businessman Arthur Wellman to support the research of MGH dermatologist John Parrish, MD, launched what is now the Wellman Center for Photomedicine, the world's largest research center focused on the medical effects and uses of light. Wellman's wife, a former Miss Sweden, had been successfully treated for severe psoriasis with a therapy Parrish had developed that combined an ancient drug with specialized ultraviolet light. On Oct. 30, some 300 current and former Wellman faculty and staff gathered at the Wyndham Hotel for an all-day celebration of the center's 40th anniversary.

Parrish, who served as chief of Dermatology from 1987-2008, tracked the growth of Wellman research from his early work, which included the use of light-activated drugs to treat several skin disorders, through development of laser therapies for the removal of birthmarks and tattoos, largely led by current Wellman director Rox Anderson, MD. Parrish stressed the importance of continuing support – from researchers and staff who volunteered to get the early programs off the ground, from the Wellman family and the Department of Defense, and from the MGH – that has allowed the development of a collaborative culture among physicians and basic scientists dedicated to improving patient care and advancing scientific knowledge.

Anderson noted that, when what had been the Wellman Laboratories became the hospital's fifth multidisciplinary thematic research center in 2004, its focus moved beyond the field of dermatology to encompass "the skin and everything in it." Wellman research today is bringing photomedicine deep within the body, using advanced optical diagnostics to radically change the fields of pathology and endoscopy, and exploring new approaches to wound healing, infection control and trauma treatment.

"Beyond these scientific advances," Anderson said, "the greatest impact of the Wellman Center has been the people who have worked or trained here, many who now lead programs at other major research centers."

The day featured talks by current and former Wellman investigators who described projects ranging from oxygen-sensing "smart" bandages, that can both detect how well a wound is healing and release required drugs on demand, to advanced imaging techniques that allow microscopic examination of surfaces and structures within living patients. Anderson also announced the launching of a postdoctoral fellowship in memory of the late Thomas F. Deutsch, PhD, a pioneer in the development of laser applications who was the first physicist to join the Wellman Center.

COLLABORATIVE CULTURE: Anderson, right, presents Parrish with a diffraction grating used in Parrish's 1981 study that established the best ultraviolet wavelength for a light-based psoriasis treatment that did not use a sensitizing drug.

eCare Corner

T Trust in the system and our care

E Explain any delays

A Apologize for wait times

M Maintain eye contact as much as possible when speaking with patients

Wave 1 go-live begins next week

NEXT WEEK the MGH will take its first step toward implementing the Partners *e*Care clinical system. On Dec. 10 a significant number of outpatient programs on the MGH main campus in Dermatology, behavioral health (Psychiatry, Psychology, Social Work) and the health professions (Physical Therapy, Occupational Therapy, Speech and Language, Nutrition, Social Work) will transition to the Epic electronic medical record. Staff are encouraged to use the TEAM approach, pictured here, when talking with patients during this time of transition and learning.

— *Medflight*

(Continued from page 1)

five years working with the FAA, Logan tower controllers and regional air traffic control, MedFlight has finalized flight routes to get to the hospitals, and still stay out of the way of Logan airline traffic.

The next phase MedFlight plans will include having the instrument approach equipment at community hospitals across eastern Massachusetts. Though it can be used in cloudy or rainy weather, it can't be used in icing conditions, making helicopter transport an option only from late spring to fall.

"The window to use the instrument approach procedure is limited in a city like Boston," says Kenin. "We may use this approach only about four to five times a month. But for those times when every minute is critical for a patient, it could make all the difference." ■

Proto celebrates 10 years

SCARLESS SURGERY. Organs on chips. Medical algorithms. Socially assistive robots. These are just a few of the fascinating medical advances that have appeared in the pages of *Proto* magazine over the past 10 years.

It was a little more than a decade ago that Arun Shanbhag, PhD, MBA, senior advisor in the MGH Orthopædic Surgery Department, observed that institution-sponsored publications existed for technology and business *(MIT Technology Review* and *Harvard Business Review,* respectively), but no such magazine existed for medicine. Moreover, with thousands of academic journals dedicated to medical sciences, it was impossible for practitioners to be informed fully about any particular disorder or treatment, even in their own fields.

Thus an idea arose at the MGH: to affirm the hospital's role as a thought leader by creating a magazine that would explore new ideas in medicine. Yet rather than focus exclusively on the MGH's own accomplishments in research and care, the hospital chose to turn the lens outward to advances the world over. And the aim was not to create a scholarly journal, but rather, a publication that could be understood and enjoyed by any curious reader, such as physicians learning about the latest developments outside their specialties, researchers, health care industry executives, medical students and others.

To produce the magazine, the MGH teamed up with the custom publishing division of Time Inc. in New York. A naming contest was held at the hospital, and the winning

(Continued on page 4)

PICTURE PERFECT: Front covers of Proto are displayed at the Paul S. Russell, MD Museum of Medical History and Innovation.

Final flu clinic scheduled

THE MGH FLU VACCINE COMMITTEE will sponsor the final flu clinic of the season next week in observance of National Influenza Vaccination Week. Adult patients (18 years and older) and employees are invited to the Maxwell & Eleanor Blum Patient and Family Learning Center to receive the flu vaccine if they have not already done so.

The clinic will run from 8 am to 4 pm, Dec. 7-9. The Blum Center is located in White 110, next to Coffee Central. MGH staff unable to come during these times can visit the MGH Occupational Health Office at 165 Cambridge River Plaza, Suite 404, to receive the flu vaccine. Appointments are not required, but can be made by calling 617-726-2217.

The Centers for Disease Control and Prevention's panel of immunization experts (Advisory Committee on Immunization Practices) recommends all people 6 months and older get a flu shot.

Transgender Day of Remembrance

REMEMBERING THOSE LOST: On Nov. 18, the MGH Lesbian, Gay, Bisexual and Transgender (LGBT) Employee Resource Group and MGH Chaplaincy co-sponsored a Transgender Day of Remembrance service in the Chapel to recognize and remember those whose lives have been lost to anti-transgender violence. Wrene Robyn, senior programmer in the Cardiology Division, pictured here, shared her courageous story at the annual observance to help increase awareness of the dehumanizing harassment and discrimination that members of the transgender community often encounter. Rev. John W. Polk, director of Chaplaincy, and Jeff Davis, senior vice president for Human Resources, offered welcoming remarks. The service included an original composition written for the occasion by pianist Stephen Lee. Garrett Garborcauskas, MGH Research technician, who played a key role in bringing the service to the MGH, read the names of those lost to violence in 2015, and MGH chaplains closed the service with blessings from various traditions.

— *Pancreatic surgery*

(Continued from page 1)

Keith Lillemoe, MD, chief of Surgery; and Cristina Ferrone, MD, of Surgical Oncology and General Surgery.

"You can try to find support groups online, but many websites can scare the living daylights out of you," says Andrea Cleghorn, who came to the MGH nearly five years ago for a Whipple procedure to treat her cancer. She attended the symposium because she was curious what other people had gone through with the procedure. "Not eating afterward and the weight loss were difficult. Coming together and talking were helpful. How often do people get to talk about their experience with others who have gone through the same thing? This was a really positive experience. The doctors sincerely cared about what we had to say."

Patients were encouraged to discuss their care and recovery with the surgeons. Cleghorn says she learned how afraid most people were of the procedure initially, but after meeting with their skilled MGH surgeons they gained confidence about their treatment. Today, Cleghorn says, she is feeling energetic and doing great.

"As patients continue to live longer following complex pancreatic surgery, we need to strive for a better understanding of their long-term outcomes," says Fernandez-del Castillo. "In addition to allowing us to reconnect with our patients, this symposium represented the critical first steps in accomplishing our mission. We hope this will become an annual event in which we can continue working together with our patients to help improve the experiences and outcomes for patients in the future." ■

— *Proto*

(Continued from page 3)

entry, submitted by Paul Shellito, MD, was *Proto*, a prefix that suggests first or novel. The magazine premiered in fall 2005 with a cover story on a burning issue at the time: avian flu.

Since then, *Proto* has published hundreds of stories on basic and clinical research, health policy and technology. The magazine's web site, *protomag.com*, saw 750,000 visits last year, and its Facebook posts and tweets were seen by more than a million people. The magazine publishing industry has recognized *Proto* with more than 50 awards for its stories and design. It has also earned acclaim from readers; one said, "I am an ardent fan of *Proto* and read it with relish and jealousy every chance I get!" Another simply noted, "Yours is a true work of art."

The magazine has received media attention as well. The *Washington Post's* health section once reprinted several *Proto* stories. When the *Post's* media reporter questioned whether this was a conflict of interest, the *Columbia Journalism Review* weighed in and said that *Proto* passed journalistic muster.

"This has been an extraordinary effort by everyone involved, from the magazine's editorial board here at the MGH, to our Time Inc. colleagues and the writers and artists who tell each complex scientific story," says Peter L. Slavin, MD, MGH president. "Over the past decade, *Proto* has delivered on the promise of its tagline: to issue dispatches from the frontiers of medicine." ■

IN THE LATEST ISSUE:

The struggle to create a national pain treatment strategy; harnessing the immune system to fight cancer; an interactive look at the past decade in health care; and more. To keep up with *Proto*, visit *protomag.com* to sign up for the e-newsletter; like *Proto* on Facebook at *facebook.com/protomag*; or follow *@ProtoMagazine* on Twitter.

EDITOR: Colleen Marshall Delaney • 617-726-0275 • **ASSISTANT EDITOR**: Colleen Keilty • 617-724-2753
EMAIL: *Hotline@partners.org* • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.

12.11.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

Study examines how unmet needs affect patients' health

A STUDY CONDUCTED in two MGH primary care practices has identified specific unmet socioeconomic needs that can interfere with the quality of care patients receive. As part of the study, the research team set up a pilot program to help patients access local services that can meet those needs.

BERKOWITZ

"Rather than focus on a single need patients may have, as earlier studies have done, we sought to comprehensively assess patients' needs and determine how they relate to illness management and the use of health services," says Seth Berkowitz, MD, MPH, of the MGH Division of General Internal Medicine, lead author of the report published in *BMJ Quality & Safety*. "While there has been a lot of interest in addressing social determinants of health, we haven't known much about the specific issues faced by patients in particular situations."

From October 2013 through April 2014, all patients seen at Internal Medicine Associates (IMA) or the Bulfinch Medical Group (BMG) were asked to complete a form – available in five languages – indicating whether they would like to receive help with needs like paying for healthy food, prescription medicine or utility bills; finding a job, receiving assistance with housing or other financial needs. Patients asking for help were referred to advocates from Health Leads, a local organization that connects patients with community services. The advocates were located in the practices and could either see patients the same day or arrange for later follow up.

Advocates worked with the patients to define their needs specifically, to identify services that could help meet those needs and to connect patients with those programs. For example, patients indicating difficulty accessing nutritious food for themselves or their children might receive assistance in applying for the SNAP (Supplemental Nutrition Assistance Program) program or be given information about local food pantries and soup kitchens. The research team also investigated how these unmet needs related to health

(Continued on page 4)

Explorations on ice:

MGH team studying seals in Antarctica

ADVENTURES IN ANTARCTICA: Team B267 out on the ice being visited by penguins and gathering samples from seals

THE WEDDELL SEAL is a champion diving mammal. It can thrive in icy Antarctic waters for extended periods of time while holding its breath, and survive the extreme pressure of deep diving due to its unique physiology.

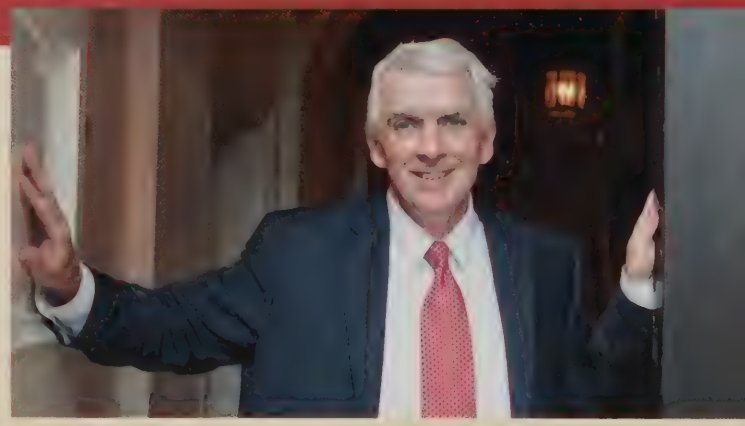
Since late September, a team from the MGH Department of Anesthesia, Critical Care and Pain Medicine has been deployed to the largest research base in McMurdo, Antarctica to study these seals and their remarkable ability to sustain periods without oxygen. The trip was funded by the National Science Foundation (NSF). Key physiological features of Weddell seals include their ability to remarkably adjust their cardiovascular system, coordinating blood pressure and blood flow to specific body regions based on their metabolic requirements.

"As the seals dive and hold their breath – which they can do for more than an hour – oxygen levels in their bodies plummet. If you or I hold our breath for a few minutes, we pass out because we run out of oxygen," says Emmanuel Buys, PhD, of the MGH

(Continued on page 4)

Meet the new MGPO CEO and chairman

Thomas J. Lynch Jr., MD, recently became CEO and chairman of the Massachusetts General Physicians Organization (MGPO), New England's largest physician practice, with more than 2,000 doctors. Lynch previously served for six years as director of the Yale Cancer Center and physician-in-chief of Smilow Cancer Hospital at Yale-New Haven. Before going to Yale, the Boston native was chief of Hematology-Oncology at the MGH Cancer Center and director of the Center for Thoracic Cancers. He first came to the MGH as an intern in 1986.



What inspired you to go into medicine?

My father was a hematologist, one of the country's first blood doctors, so I was exposed to medicine very early. He took care of both children and adults. I was struck by the profound impact physicians have on the lives of their patients. To this day, that is something that resonates with me and confirms that I did the right thing.

As a cancer specialist, you frequently care for people facing life-changing situations. Would you mind reflecting on one who had a major impact on you?

Different cases have affected me in different ways. There have been patients like Ken Schwartz, who founded the Schwartz Center for Compassionate Healthcare. Ken had advanced lung cancer. I put him on multiple clinical trials and tried lots of different drugs but nothing really ever affected "the biology" of his cancer. However, he has taught us that much of what we did for him affected him in other more profound ways.

As Ken was dealing with end-of-life issues, he decided to write an article for the *Boston Globe Magazine*. He wrote about the importance of his connections with caregivers and how their humanity was more important than all their technology. The story reminds physicians and nurses to stay in the moment. It reminds you that your interaction with each patient is the most important thing you are going to do that day, that week, maybe that year and possibly your whole life.

Why did you decide to come back to the MGH?

No place meets its mission as completely as the MGH. We provide outstanding patient care, lead the way in innovation and discovery and also train the next generation of doctors. MGPO physicians have a unique role and responsibility to really change the way medicine is practiced. So the chance to lead the MGPO was extraordinarily compelling and exciting.

What are your top priorities?

The missions of the MGPO and the MGH are very much tied together. We provide routine care in an extraordinary fashion and we must continue to do so. More than that, we innovate. MGPO physicians are conducting new clinical trials changing the face of how diseases ranging from cancer to stroke to joint degeneration are treated.

But the economics of health care are a lot different from when my father was in practice in the 1960s. He had a part-time secretary and that was it. A typical practitioner now is supported by eight to ten people. Our costs are skyrocketing and we have reached the point where further increases are unsustainable. There is so much more involved in meeting the many missions that we have to meet as physicians. One of the key things the MGPO can do is to think about how we can create systems that allow doctors to work better. We do this because the patients have confidence that MGPO physicians and the MGH are going to keep them healthy and, when they have a disease, we are going to do things to help them overcome it.

Our scientists and clinical researchers are uniquely positioned to take advantage of these advances because of the strength of the MGH's philanthropic base.

What is the biggest challenge the MGPO and the MGH face over the next five years?

It is how we continue to innovate and improve health outcomes at a time when the economics of health care are going to make it harder to do that. We all recognize that you can't increase the health care spending by 15 percent per year the way we were doing. Yet there are opportunities that we never had that we want to pursue to improve outcomes, opportunities in terms of science and discovery and new drugs, treatments and devices.

I couldn't think of a better place to be to face those challenges than the MGH and the MGPO. We really have a special and unique group of people here.

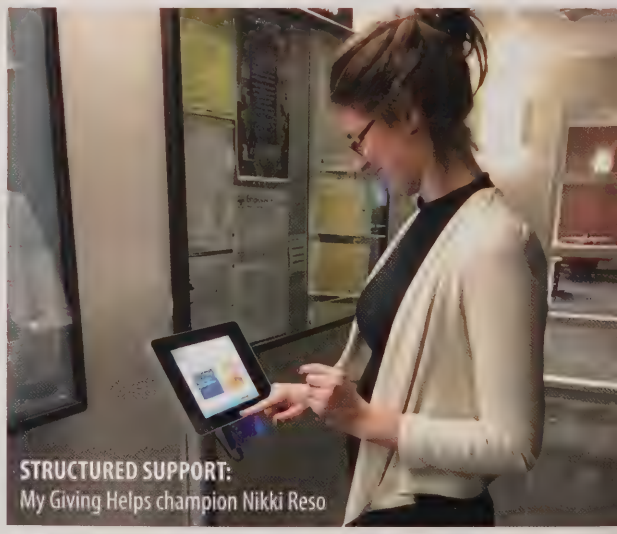
My Giving Helps introduces new way to give

TO CELEBRATE the giving season, the My Giving Helps: The MGH Fund + United Way campaign has collaborated with various hospital departments to launch a new way to give.

Thanks to the efforts of the Lab of Computer Science, hospital leadership and the campaign committee, employees will have the opportunity to make a recurring payroll pledge or one-time payroll deduction by way of two permanent "Giving Stations" located outside of Eat Street Café and in the lobby of Building 149 at the Charlestown Navy Yard. These installations are aimed to increase campaign visibility year-round while increasing employee participation and revenue for the MGH Fund and United Way.

Gifts to the My Giving Helps campaign support both the MGH Fund, an unrestricted fund that supports the most promising programs and initiatives at the hospital, and United Way, which provides assistance to more than 170 organizations in the Boston Area.

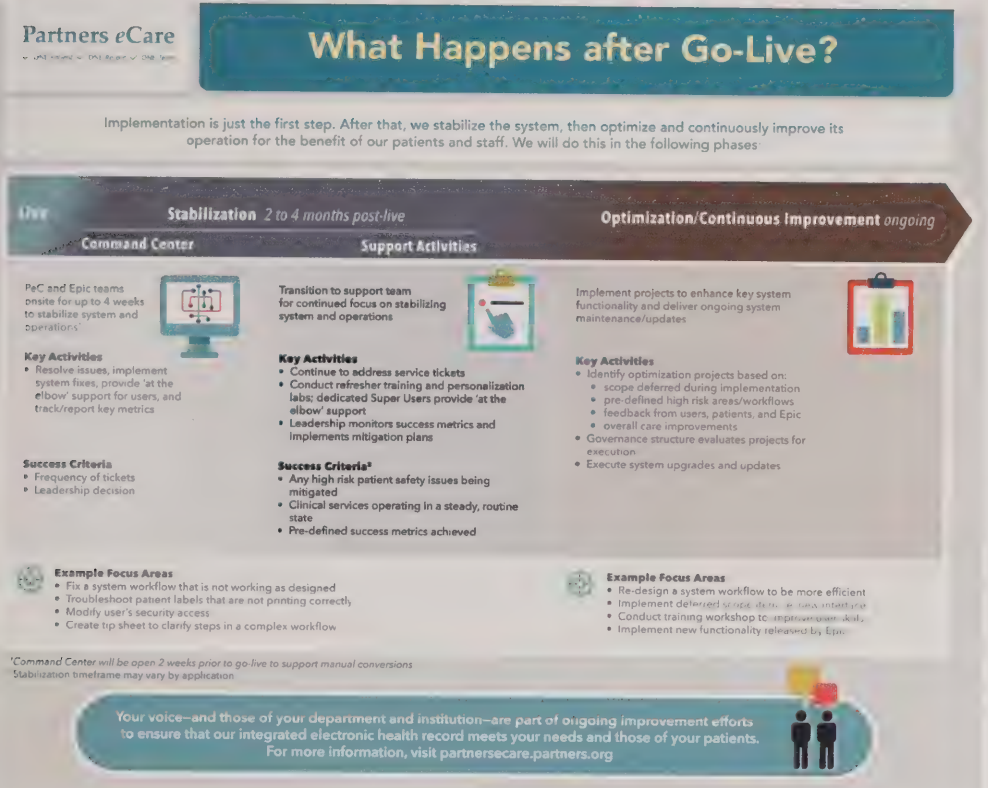
To learn more about the campaign or to make a donation, visit *www.mygivinghelps.org* ■



STRUCTURED SUPPORT: My Giving Helps champion Nikki Reso

eCare Corner

MGH implements first phase of eCare clinicals


Partners eCare
What Happens after Go-Live?
Implementation is just the first step. After that, we stabilize the system, then optimize and continuously improve its operation for the benefit of our patients and staff. We will do this in the following phases
Live
Stabilization 2 to 4 months post-live
Optimization/Continuous Improvement ongoing
Command Center
Support Activities
PeC and Epic teams onsite for up to 4 weeks to stabilize system and operations
Key Activities
Resolve issues, implement system fixes, provide 'at the elbow' support for users, and track/report key metrics
Success Criteria
Frequency of tickets
Leadership decision
Transition to support team for continued focus on stabilizing system and operations
Key Activities
Continue to address service tickets
Conduct refresher training and personalization labs; dedicated Super Users provide 'at the elbow' support
Leadership monitors success metrics and implements mitigation plans
Success Criteria*
Any high risk patient safety issues being mitigated
Clinical services operating in a steady, routine state
Pre-defined success metrics achieved
Implement projects to enhance key system functionality and deliver ongoing system maintenance/updates
Key Activities
Identify optimization projects based on:
scope deferred during implementation
pre-defined high risk areas/workflows
feedback from users, patients, and Epic
overall care improvements
Governance structure evaluates projects for execution
Execute system upgrades and updates
Example Focus Areas
Fix a system workflow that is not working as designed
Troubleshoot patient labels that are not printing correctly
Modify user's security access
Create tip sheet to clarify steps in a complex workflow
Example Focus Areas
Re-design a system workflow to be more efficient
Implement deferred scope items in next release
Conduct training workshop to improve user skill
Implement new functionality released by Epic
*Command Center will be open 2 weeks prior to go-live to support manual conversions
Stabilization timeframe may vary by application
Your voice–and those of your department and institution–are part of ongoing improvement efforts to ensure that our integrated electronic health record meets your needs and those of your patients.
For more information, visit partnersecare.partners.org

AFTER YEARS of planning and months of preparation and training sessions, the MGH has officially launched the first phase of the Partners *e*Care clinical system implementation. Hundreds of staff members in a number of outpatient programs on the MGH main campus – including those in Dermatology, behavioral health (Psychiatry, Psychology, Social Work) and the health professions (Physical Therapy, Occupational Therapy, Speech and Language, Nutrition, Social Work) – have now transitioned to using the Epic electronic medical record.

"We would like to express our sincere appreciation to the entire MGH community for your help in working to ensure this transition is as seamless and successful as possible," says Sally Mason Boemer, senior vice president for Finance and executive sponsor for Partners *e*Care Implentation. "This first wave of implementation brings us one step closer to our ultimate goal of 'one patient, one record, one team, one Partners statement.' We thank you for your commitment to providing the highest-quality, safest and best possible care for our patients."

Other ambulatory areas will go live Jan. 14 and Jan. 28, 2016, and inpatient areas and the remaining ambulatory practices will go live on April 2, 2016. ■

Responding to the needs of the MGH communities

STRIVING TO RESPOND to the most critical public health issues is one of the missions of the MGH. The hospital continually works to strengthen programs and offerings to improve the health and well-being of the diverse communities the hospital serves. As part of these efforts, the MGH Center for Community Health Improvement (CCHI) has once again conducted a community health needs assessment, as it has done several times during the past 20 years. This year, 1,600 residents in Revere, Chelsea and Charlestown responded to a quality-of-life survey, and 120 individuals participated in focus groups, during which important community and public health data were gathered and examined.

Substance use – particularly the opioid epidemic – public safety and crime and violence remain the top health issues in these communities, with 80 percent of survey respondents choosing substance use as their top health concern, up from 70 percent the last time the assessment was completed in 2012. Obesity, poor diet and inactivity also continue to be priorities, followed closely by an emerging concern about adolescent mental health. Residents also said that education, the environment and housing were major concerns.

As a result of the survey, the MGH will strengthen its community coalition strategies to prevent and reduce substance use, improve healthy eating and active living, and reduce and mitigate the effects of trauma and violence. The hospital will work to screen patients for food and housing insecurity and strengthen the community health worker model to improve access to care for those most in need. The MGH also plans to broaden the horizons and promote educational attainment for youth through strengthening and expanding programs in science, technology, engineering and math.

A global visit

PROVIDING HEALTH CARE AID TO REFUGEES: Larry Ronan, MD, director of the Durant Fellowship in Refugee Medicine in the MGH Center for Global Health, visited the Za'atari Syrian Refugee Camp in Northern Jordan in late November as the guest of the Jordanian Health Aid Society (JHAS), a local nongovernmental organization responsible for health care of the Syrian refugees. The camp is home to 86,000 Syrian refugees. Ronan is pictured here, at left, with JHAS doctors serving in the camp's Women & Girls Comprehensive Center. The Durant Fellowship is open to all MGH staff to support efforts to assist refugees. For more information, email *lronan@partners.org*.

No-shave November

JOINING THE FIGHT AGAINST CANCER: It was a hair-raising, or growing, month for the Department of Urology. Thirty MGH staffers and nearly 20 patients joined more than 5 million men and women for "Movember," an annual initiative focused on raising awareness of men's health issues. As part of Team BellissiMo – a partnership of the MGH, Brigham and Women's Hospital, Dana Farber Cancer Institute, Harvard School of Public Health, Massachusetts Institute of Technology and Boston University – the department has raised more than $44,000 this year to support the fight against prostate and testicular cancer, mental illness and physical inactivity. Above, Team BellissiMo poses at a fundraising event at the Foundation Room in Boston.

— *Explorations on ice*

(Continued from page 1)

Anesthesia Center for Critical Care Research (ACCCR). "We want to understand how Weddell seals can cope with oxygen deprivation. Perhaps if we understand how they deal with lack of oxygen, we can develop strategies to help people who suffer from diseases associated with oxygen deprivation – such as heart attacks or strokes."

The team, known as B267, is led by Buys; Warren Zapol, MD, emeritus anesthetist-in-chief; and Allyson Hindle, PhD, ACCCR researcher. Also on the team is Daniel Costa, PhD, of the University of California at Santa Cruz (UCSC); Luis Huckstadt, PhD, a UCSC researcher; and Kaitlin Allen, a research technician in the ACCCR. Zapol has been going on research expeditions to Antarctica since the 1970s.

"The whole experience has been surreal," says Buys. "The beauty and harshness of the continent, working with the Weddell seals on the sea ice, coming across penguins and visiting the well-preserved huts of Scott and Shackleton (early explorers to Antarctica) were certainly highlights."

The team, in addition to studying seals, learned how to travel on the ice via snowmobiles, got up-close and personal with penguins and experienced the bitter cold and beauty that Antarctica has to offer.

"An unexpected bonus was that I got to meet incredible people down here – both scientists and support staff – some of whom I hope to remain friends with long after I leave Antarctica," says Buys.

The team is now on their way back from Antarctica, but will continue to share about their trip and findings. For more information and photos about the group's time in Antarctica, follow their blog at *http://buyslab.mgh.harvard.edu/antarctica/* and view photos at *https://instagram.com/b267_mcmurdo/*. ■

— *Unmet needs*

(Continued from page 1)

conditions and other information noted in medical records.

During the seven-month study period, 416 patients indicated one or more unmet needs and enrolled in the Health Leads program. The most commonly reported unmet needs were difficulty affording health care – including prescription drugs – food or utilities. Conditions like depression, diabetes and hypertension were more prevalent among patients with unmet needs, and those individuals were more likely to be frequent users of hospital emergency departments and to miss scheduled clinic appointments. In patients with conditions like diabetes or elevated cholesterol levels, those with unmet needs were more likely to have trouble controlling risk factors.

The services with which patients were most frequently connected provided assistance with food, utility payments or energy costs, prescription drugs and health insurance. At the end of the study period, 62 percent of the identified needs either were met or patients indicated no longer needing help. In 4 percent of cases needs were still unmet, and in 34 percent, the patients were lost to follow up. Relationships between unmet needs and health issues often were clear – such as food access and diabetes control or transportation difficulties and missed clinic appointments – although the study was not long enough to determine whether accessing the services reduced the problems.

Berkowitz says, "Unmet needs are so common in the U.S. – one-third of American adults with a chronic illness have trouble affording food, medication or both – that issues like this will come up in almost any practice. If practices are willing, programs designed to link patients to basic resources could be relatively easy to generalize." The Health Leads program continues to be offered in the IMA and BMG practices and has been expanded to Women's Health Associates. MGH co-authors of the report are senior author Steven Atlas, MD, MPH, Clemens Hong, MD, MPH, and Carine Traore, MPH, of the Division of General Internal Medicine.

Upcoming *Hotline* editions

THERE ARE TWO editions of *Hotline* left in 2015. Be sure to pick up the Dec. 18 holiday edition to see photos from some of the fun and festive happenings at the MGH this holiday season. Our final special year-in-review edition will be distributed Dec. 29, and will include a Top 10 list, a photo collage of the past year, and 2015 memorable moments from MGHers. This edition also will include the 2016 fold-out calendar, with a list of MGH holidays.

Would you like your most memorable moment to be featured in the year-in-review edition? As 2015 comes to a close and you reflect back on the past year, is there one memory that stands out that makes you most proud to work at the MGH and be part of this community? Perhaps you achieved a personal triumph, encountered a patient or family who truly moved you, or simply forged friendships with your colleagues both new and old. Send your memory along, in a few sentences, to *hotline@partners.org* by Dec. 15.

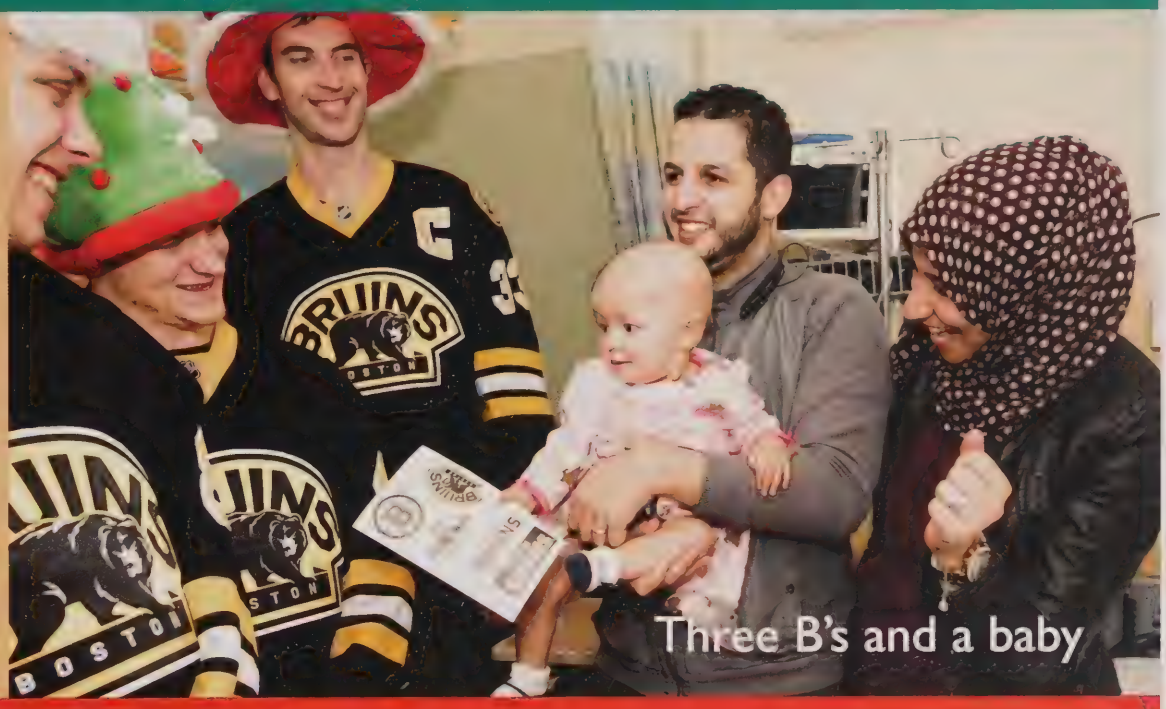
The first 2016 edition will be distributed on Jan. 8.

MASSACHUSETTS GENERAL HOSPITAL
EDITOR: Colleen Marshall Delaney • 617-726-0275 • **ASSISTANT EDITOR:** Colleen Kelly • 617-724-2753
EMAIL: *Hotline@partners.org* • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.

12.18.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL



Three B's and a baby

WARMING HEARTS OFF THE ICE: On Dec. 15, Santa sent elves, in the form of Boston Bruins Zdeno Chara, David Pastrnak, Torey Krug and Jonas Gustavsson to MassGeneral Hospital *for* Children to deliver gifts to patients on the Pediatric Hematology-Oncology Unit and on Ellison 18 – including Amira Farid, 7 months, seen here with her parents. As part of an annual tradition started by the legendary defenseman Ray Bourque, the players also signed autographs, posed for photos and distributed Bruins themed gift bags.

Happy Holidays!

The gift of music

ANGELIC VOICES: The Central Intermediate Advanced Choir of the nationally recognized Boston Children's Chorus sang Christmas carols in the White Lobby and hosted a holiday concert in the MGH Chapel on Dec. 14. Directed by Michelle Adams, the group performed the festive tunes to the enjoyment of parents, staff, patients and families. The heartwarming event was sponsored by MGH Chaplaincy and the Vaccine and Immunotherapy Center. "It clearly meant a lot to our talented young choir members that they had such a positive impact at the hospital," says Adams.

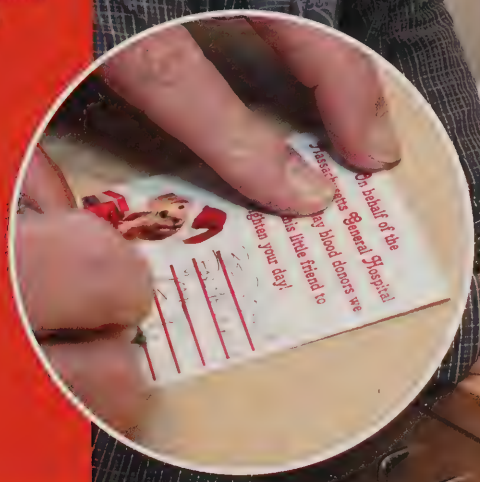
MONSTER VISIT: On Dec. 11, Boston Red Sox, from left, Deven Marrero, Noe Ramirez, Robbie Ross Jr. and Craig Kimbrel – along with mascot Wally the Green Monster – spread holiday cheer while visiting MassGeneral Hospital *for* Children patients on Ellison 17, 18 and the Pediatric Intensive Care Unit as part of the annual Red Sox Holiday Caravan. Here, Emily Hedspeth, 18, receives autographed balls from the players during the visit.

FESTIVAL OF LIGHTS: Ronald Hirschberg, MD, of the Department of Physical Medicine and Rehabilitation, left, and Allan Goldstein, MD, surgeon-in-chief of MassGeneral Hospital *for* Children, light the menorah during the annual MGH Community Chanukah Celebration on Dec. 10 in the Trustees Room. Attendees feasted on latkes (potato pancakes) and sufganiyot (jelly doughnuts), enjoyed music, a game of dreidel and a fun and festive time with friends and colleagues. The event was sponsored by Human Resources and MGH Chaplaincy.

CHRISTMAS CUSTOM: Santa Claus was admitted to the MGH earlier this month as part of an annual tradition that dates back to the early 1950s when a Department of Surgery resident first decided to create an entertaining account of Ol' Saint Nick's medical record. Led by Nikhil Panda, MD, this year's surgical residents were assured a spot on Santa's "Nice List" after providing top-notch care to ensure he quickly returned to his jolly, happy self – just in time for international travel.

Giving pints and puppies

DOG TAGS: Tom Kane, a regular platelet donor at the MGH Blood Donor Center, fills out a gift tag for the center's annual Puppy Pals Program. Anyone donating blood is welcome to fill out one of the gift tags, which will then be attached to stuffed animals and other toys. The animals will be delivered to patients at MassGeneral Hospital *for* Children.



Action-packed celebration

SUPERHERO SMILE: Matthew Cech, 11, right, poses with a new action figure set and Mike Hirsh, director of Programming and Volunteer Services for ROFEH International. The gift was part of a large donation presented to MassGeneral Hospital *for* Children during a Chanukah celebration on Dec. 9.

That's a wrap

ELVES AT WORK: Teens from the Revere Youth Zone helped wrap some 40 gifts on Dec. 14 for the annual MGH Revere HealthCare Center's Holiday Toy Drive. This event will provide toys to 450 children at the health center whose families are experiencing hardship. The group also receives toys from other generous MGH departments, including MGH Community Health Associates, MGPO Finance, MGH Case Management, the Division of Internal Medicine, the Medical Practice Evaluation Center and the Mongan Institute of Health Policy. The Youth Zone is an after-school program affiliated with MGH Revere, providing homework help, cooking classes, fitness, volunteer opportunities, arts and crafts, games and field trips.

12.18.15

MGH HOTLINE

Yuletide carolers

HALLWAY HARMONIES: The White hallway was filled with musical melodies Dec. 17 as part of the annual Holiday Song Fest, hosted by MGH Chaplaincy. Participants celebrated the season with festive hats and attire – much to the delight of their colleagues, patients, families and caregivers.

Celebrating the season

FOOD, FESTIVITIES AND FUN: MGH staff at the main campus and Charlestown Navy Yard enjoyed refreshments, music and holiday cheer during the annual Holiday Receptions hosted by Peter L. Slavin, MD, MGH president.

Wooden wonderland

MASTERS OF THEIR CRAFT: During the third annual Woodworking Elf Workshop event, patients partnered with staff from MGH Buildings and Grounds to construct and decorate gingerbread houses, sleds and birdhouses. Caroline Armington, MS, CCLS, child life specialist, left, and Bill Belton, carpenter foreman of Buildings and Grounds, guide Ruby O'Neill, 11, as she decorates her gingerbread house.

SPECIAL MGH HOTLINE EDITION

MGH Hotline will publish its annual "year in review" edition on Dec. 29. The publication also will feature a special 2016 fold-out calendar, which lists all of the official MGH holidays. *MGH Hotline* will not publish on Jan. 1 because of the New Year's holiday, but will resume its regular printing schedule on Jan. 8.

MASSACHUSETTS GENERAL HOSPITAL

EDITOR: Colleen Marshall Delaney • 617-726-0275 • **ASSISTANT EDITOR:** Colleen Kelly • 617-724-2753

EMAIL: Hotline@partners.org • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114

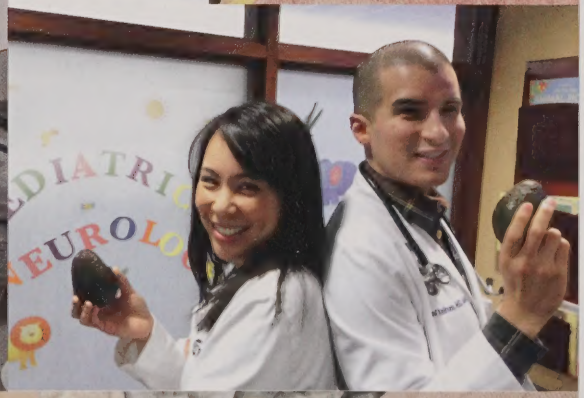
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.

12.29.15

MGH HOTLINE

A PUBLICATION FOR EMPLOYEES AND STAFF OF THE MASSACHUSETTS GENERAL HOSPITAL

A look back at 2015



Lasting impact

MGHers share their favorite memories of 2015

My most proud patient encounter and rewarding nursing moment this year was right before Thanksgiving. The patient I was taking care of was very sick but in good spirits. She shared stories of her family and painted a picture of her world – not as a patient, but as a fun, caring person. When she was leaving, she thanked me for taking care of her so that she can go home to share what could be her elderly mother's last Thanksgiving. I held her hand and cried with her, and I told her, "This is why I chose this career." I know the common goal is to take care of our patients, but I also feel so much fulfillment in the process. It's extremely rewarding!

Angela Dalembert, RN
Wang 626 Urgent Care

What impressed me most about 2015 was the way the organization responded to the unprecedented series of seemingly never-ending snowstorms. The whole city/state/transit system essentially shut down for days at a time, yet the MGH community managed to move mountains to get to work and make sure patients were safe and well cared for. You can tell a lot about an organization by the way it responds in times of crisis, and the MGH always pulls together to meet the mission, despite whatever calamity is thrown its way. I was once again proud to work at the MGH.

Andrea B. Paciello, MHSA, FACHE
Executive Director, Teaching & Education in Graduate Medical Education

I have really loved being a part of the revival of the MGH Running Club this year. Back in June, I started sending some emails asking about what I came to learn was a pretty dormant running group – and today the club has more than 100 members! A new face joins us for our runs almost every week, and over 45 MGHers came out to run the Cambridge Winter Classic 5K. It's been so great to meet so many people from around the MGH community, give regular runners the group they may need to stay motivated, help others get into running again, and show new runners that running can be fun and relaxed. It makes it much easier for busy MGHers to have a community they know will always be there whenever they can make it, even if they can't make it all too often. I'm so proud to be part of such a great MGH community!

Alexandra Bukowski
Clinical Research Coordinator, MGH-Avon Breast Cancer Research Program

For the MGH Center for Community Health Improvement team (CCHI), our special memory is the joint event held on June 4 at the MGH to celebrate the 20th anniversary of CCHI and the 10th anniversary of the Disparities Solutions Center. Both centers exemplify the MGH's nationally recognized leadership in efforts to reduce health care disparities and to improve the health of the local communities the MGH serves.

Susan Leahy, MSPA
Communications Manager, Center for Community Health Improvement

Deploying to Nepal this year convinced me to follow my passion for Emergency Preparedness.

Monica Staples, RN
Clinical Nurse Specialist, Emergency Medicine

There are times when our encounters with patients can be so sad – such as when a child has been abused and is now withdrawn, afraid to cry, make eye contact, play or even to move in front of another human being. We recently had a child such as this. The nursing staff and child life specialists understood that expressing love was a main goal of care. Staff held, hugged and played with this child endlessly. With the endless positive, loving attention for approximately two weeks, the child found her voice and began to speak, demand to play, reach out to be held, and in a normal childish way cried real tears when uncomfortable. This is the true meaning of our care and a tribute to the entire staff of Ellison 17.

Brenda Miller, RN
Nursing Director, Ellison 17

For Veterans Day, Home Base produced a telethon that aired on *WCVB* and highlighted the work of MGH clinicians and featured interviews with veteran patients who shared their stories of service and struggle, and the life-changing care they received at Home Base. During the telethon, I received several phone calls from donors who said they were deeply touched by the stories. Many commented that Home Base seemed to offer hope. Hope is the brightest light we can shine on anyone and anything in the world. People come to the MGH with the hope that they can heal or that they can contribute to someone else's healing process. There is history being made and miracles happening all across this campus, and that is never more evident than when we listen to our patients describe how their darkest days were carefully, gracefully, and steadily brightened with the hope of a better future. It was a privilege to produce this show, to sit with these men and women and tell their story through the telethon – and it is a great honor to work on behalf of an organization that shines the bright light of hope into so many people's lives.

Kristen Chadwick
Media Relations Manager of Home Base, a partnership between the Red Sox Foundation and the MGH

The MGH Revere Youth Zone members spent many glorious hours out on the waters of the Boston Harbor thanks to Piers Park Sailing Center in East Boston. They learned nautical skills, leadership skills, built their self-confidence and made new many friends. There wasn't a better way to keep cool on a summer afternoon!

Leslie Heffron, RN, BSN, MEd
Nurse Coordinator of Youth Services, MGH Revere HealthCare Center

The MGH's recent designation as a Baby-Friendly hospital was the culmination of a three-year true multidisciplinary team effort – including outpatient clinic staff, inpatient nurses, obstetricians, pediatricians, anesthesiologists, midwives, nutritionists, lactation consultants, patient care information associates, operations associates, critical care and medical/surgical staff and the Human Resources orientation team. In achieving Baby-Friendly designation, the MGH is recognized as a leader in educating mothers on infant nutrition, ultimately improving the health outcomes of moms and infants. The MGH is the ninth hospital in the state of Massachusetts and the second and largest hospital in the city of Boston to achieve designation. 2015 has been an exciting year for our team!

The MGH Baby Friendly Committee

2015: The year in review

Here is a look at some of the many incredible moments that took place at the MGH this year.

1. MGH is #1

The MGH was ranked #1 in the nation on the *U.S. News & World Report* 2015-2016 Best Hospitals list. The report recognized the MGH in all 16 of the specialties ranked by the publication, the only hospital in the country to receive this honor.

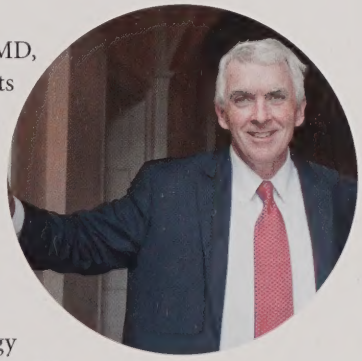
2. It snowed ... and snowed ...

Mother Nature unleashed some 25 inches of snow in Boston on Jan. 26 and 27 during winter storm Juno. With a state of emergency and travel ban in effect – and the hospital at 100 percent capacity – some staff slept at the hospital and many covered shifts for those who could not make it in.

3. Aid to Nepal

On April 25, a devastating 7.8-magnitude earthquake struck Nepal. The death toll rose to more than 9,000 people, an additional 23,000 were reportedly injured and thousands more were left without homes. The MGH deployed 13 staff members in two teams to provide assistance, joining two hospital physicians who already were working in-country at the time of the earthquake.

4. Leadership changes



In early February, David F. Torchiana, MD, chairman and CEO of the Massachusetts General Physicians Organization (MGPO), was named president and CEO of Partners HealthCare.

Thomas J. Lynch, Jr., MD, was named the new chairman and CEO of the MGPO in July. Lynch is a familiar face at the MGH, having previously once served as chief of Hematology-Oncology at the MGH Cancer Center and director of the Center for Thoracic Cancers.

5. Joint Commission visit

The survey team from The Joint Commission completed its five-day assessment of the MGH's hospital and laboratory sites on April 17. The 13-member survey team spent an equivalent of 51 days here, examining patient care areas, facilities and laboratory sites. The team reported how impressed they were with the quality of the care the hospital delivers every day, highlighting the commitment of staff.

The Joint Commission

6. Experimental technique

A team of MGH investigators made the first steps toward the development of bioartificial replacement limbs suitable for transplantation. In a report published in the journal *Biomaterials*, the researchers described an experimental approach previously used to build bioartificial organs to engineer rat forelimbs with functioning vascular and muscle tissue. They also provided evidence that the same approach could be applied to the limbs of primates.

7. Introducing HUBweek

Thousands of participants attended festivities at the MGH as part of the inaugural HUBweek, a citywide festival hosted by the MGH, Harvard University, Massachusetts Institute of Technology and *The Boston Globe*. The MGH programs celebrated art, science, technology and breakthroughs in life sciences, tackled tough health care challenges, and showcased advances in neuroscience, cancer research and care delivery.

8. Special center

In June, the MGH was designated as an Ebola and Special Pathogens Treatment Center. To further strengthen the nation's infectious disease response capacity, the U.S. Department of Health and Human Services selected nine health departments, each in partnership with a regional hospital, to become regional treatment centers for patients with Ebola and other highly pathogenic infectious diseases. The MGH's designation will result in further investments in physical capacity and biothreats program development to ensure that the hospital remains prepared to provide safe and effective care in this domain.

9. Research Institute launches

The MGH launched its new Research Institute – an initiative to support, promote and guide the hospital's existing research enterprise. The Research Institute comprises more than 6,000 staff working across more than 30 research centers, institutes and departments, and is the largest hospital-based research program in the nation.

10. 'Save My Life' airs

The ABC medical documentary series, "Save My Life: Boston Trauma" – which featured the MGH, Brigham and Women's Hospital, Boston Medical Center and Boston EMS – captured the attention of millions of viewers nationwide. The series showcased the amazing work of MGH clinicians and the resiliency of patients and their families.

4	5 Labor Day	6	7	8	9	10
11	12 Eid al-Adha	13	14	15	16	17
18	19	20	21	22 First Day of Autumn	23	24
25	26	27	28	29	30	

2 Rosh Hashanah (Begins at sunset)	3	4	5	6	7	8
9	10 Columbus Day	11 Yom Kippur (Begins at sunset)	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30 Diwali	31 Halloween					

NOVEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
		1	2	3	4	5
6 Daylight Saving Time ends	7	8 Election Day	9	10	11 Veterans Day	12
13	14	15	16	17	18	19
20	21	22	23	24 Thanksgiving Day	25	26
27	28	29	30			

DECEMBER

SUN	MON	TUE	WED	THU	FRI	SAT
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21 First Day of Winter	22	23	24 Chanukah (Begins at sunset)
25 Christmas Day	26 Kwanzaa begins	27	28	29	30	31 New Year's Eve

Denotes Massachusetts holiday celebrated by the MGH

MASSACHUSETTS GENERAL HOSPITAL

EDITOR: Colleen Marshall Delaney • 617-726-0275 • **ASSISTANT EDITOR**: Colleen Keilty • 617-724-2753
EMAIL: *Hotline@partners.org* • **MAIL:** Public Affairs Office • 125 Nashua Street, Suite 220 • Boston, MA 02114
MGH Hotline is printed on recycled paper and published weekly by the MGH Public Affairs Office.